

Fill in this information to identify the case:

Debtor name Noah Corporation

United States Bankruptcy Court for the: DISTRICT OF UTAH

Case number (if known) 19-23840

☐ Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING — Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ Amended Schedule
- ☐ Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders (Official Form 204)
- ☐ Other document that requires a declaration

I declare under penalty of perjury that the foregoing is true and correct.

Executed on June 20, 2019

x 
Signature of individual signing on behalf of debtor

Mark Hashimoto
Printed name

Chief Restructuring Officer
Position or relationship to debtor

Fill in this information to identify the case:

Debtor name Noah Corporation

United States Bankruptcy Court for the: DISTRICT OF UTAH

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Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. **Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

1a. Real property: Copy line 88 from <i>Schedule A/B</i>	\$ 0.00
1b. Total personal property: Copy line 91A from <i>Schedule A/B</i>	\$ 252,589.39
1c. Total of all property: Copy line 92 from <i>Schedule A/B</i>	\$ 252,589.39

Part 2: Summary of Liabilities

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D) Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i>	\$ 0.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)	
3a. Total claim amounts of priority unsecured claims: Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i>	\$ 448,013.53
3b. Total amount of claims of nonpriority amount of unsecured claims: Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i>	+\$ 33,977,689.03
4. Total liabilities Lines 2 + 3a + 3b	\$ 34,425,702.56

Fill in this information to identify the case:Debtor name Noah CorporationUnited States Bankruptcy Court for the: DISTRICT OF UTAHCase number (if known) 19-23840☐ Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets - Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents**1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.
☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor**Current value of debtor's interest****3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. Chase BankChecking6585\$30,451.39**4. Other cash equivalents (Identify all)****5. Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$30,451.39**Part 2: Deposits and Prepayments****6. Does the debtor have any deposits or prepayments?**

- ☒ No. Go to Part 3.
☐ Yes Fill in the information below.

Part 3: Accounts receivable**10. Does the debtor have any accounts receivable?**

- ☐ No. Go to Part 4.
☒ Yes Fill in the information below.

11. Accounts receivable

11a. 90 days old or less:

20,276.00

-

10,138.00 =\$10,138.00

face amount

doubtful or uncollectible accounts

Debtor Noah Corporation
Name

Case number (If known) 19-23840

12. **Total of Part 3.**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$10,138.00

Part 4: Investments

13. Does the debtor own any investments?

- ☒ No. Go to Part 5.
☐ Yes Fill in the information below.

Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

- ☐ No. Go to Part 6.
☒ Yes Fill in the information below.

	General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19.	Raw materials				
20.	Work in progress				
21.	Finished goods, including goods held for resale				
22.	Other inventory or supplies				
	Alcohol	5/28/19	\$120,000.00		\$120,000.00

23. **Total of Part 5.**

Add lines 19 through 22. Copy the total to line 84.

\$120,000.00

24. Is any of the property listed in Part 5 perishable?

- ☐ No
☒ Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

- ☒ No
☐ Yes. Book value _____ Valuation method _____ Current Value _____

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- ☒ No. Go to Part 7.
☐ Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- ☐ No. Go to Part 8.
☒ Yes Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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Debtor Noah Corporation Case number (If known) 19-23840
Name

39. **Office furniture**

40. **Office fixtures**

41. **Office equipment, including all computer equipment and communication systems equipment and software**
See attached Schedule 1 \$50,000.00 \$50,000.00

42. **Collectibles** *Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

43. **Total of Part 7.** \$50,000.00
Add lines 39 through 42. Copy the total to line 86.

44. **Is a depreciation schedule available for any of the property listed in Part 7?**

☒ No
☐ Yes

45. **Has any of the property listed in Part 7 been appraised by a professional within the last year?**

☒ No
☐ Yes

Part 8: Machinery, equipment, and vehicles

46. **Does the debtor own or lease any machinery, equipment, or vehicles?**

☐ No. Go to Part 9.
☒ Yes Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
48. Watercraft, trailers, motors, and related accessories <i>Examples:</i> Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels			
49. Aircraft and accessories			
50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment) 42 Coffee Machines <u>\$42,000.00</u>			<u>\$42,000.00</u>

51. **Total of Part 8.** \$42,000.00
Add lines 47 through 50. Copy the total to line 87.

52. **Is a depreciation schedule available for any of the property listed in Part 8?**

☒ No
☐ Yes

53. **Has any of the property listed in Part 8 been appraised by a professional within the last year?**

☒ No
☐ Yes

Part 9: Real property

Debtor Noah Corporation
Name

Case number (If known) 19-23840

54. Does the debtor own or lease any real property?

- ☐ No. Go to Part 10.
☒ Yes Fill in the information below.

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building, if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1. See attached Schedule 2		\$0.00		\$0.00

56. Total of Part 9.

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets.
Copy the total to line 88.

\$0.00

57. Is a depreciation schedule available for any of the property listed in Part 9?

- ☒ No
☐ Yes

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 10: Intangibles and intellectual property

59. Does the debtor have any interests in intangibles or intellectual property?

- ☐ No. Go to Part 11.
☒ Yes Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets			
61. Internet domain names and websites Website - noaheventvenue.com	\$0.00		\$0.00
62. Licenses, franchises, and royalties			
63. Customer lists, mailing lists, or other compilations Customer Lists	Unknown		Unknown
64. Other intangibles, or intellectual property Custom Software App	Unknown		Unknown

65. Goodwill

Debtor Noah Corporation
Name

Case number (If known) 19-23840

66. **Total of Part 10.**

Add lines 60 through 65. Copy the total to line 89.

\$0.00

67. **Do your lists or records include personally identifiable information of customers** (as defined in 11 U.S.C. §§ 101(41A) and 107?)

- ☒ No
☐ Yes

68. **Is there an amortization or other similar schedule available for any of the property listed in Part 10?**

- ☒ No
☐ Yes

69. **Has any of the property listed in Part 10 been appraised by a professional within the last year?**

- ☒ No
☐ Yes

Part 11: All other assets

70. **Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☐ No. Go to Part 12.
☒ Yes Fill in the information below.

Current value of
debtor's interest

71. **Notes receivable**

Description (include name of obligor)

72. **Tax refunds and unused net operating losses (NOLs)**

Description (for example, federal, state, local)

See attached Schedule 3

Tax year

\$0.00

73. **Interests in insurance policies or annuities**

74. **Causes of action against third parties (whether or not a lawsuit has been filed)**

75. **Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims**

76. **Trusts, equitable or future interests in property**

77. **Other property of any kind not already listed** Examples: Season tickets, country club membership

78. **Total of Part 11.**

Add lines 71 through 77. Copy the total to line 90.

\$0.00

79. **Has any of the property listed in Part 11 been appraised by a professional within the last year?**

- ☒ No
☐ Yes

Debtor Noah Corporation Case number (If known) 19-23840
Name

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	\$30,451.39	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$0.00	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$10,138.00	
83. Investments. <i>Copy line 17, Part 4.</i>	\$0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$120,000.00	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$50,000.00	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$42,000.00	
88. Real property. <i>Copy line 56, Part 9.....></i>		\$0.00
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$0.00	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ \$0.00	
91. Total. Add lines 80 through 90 for each column	\$252,589.39	+ 91b. \$0.00
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		\$252,589.39

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Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☒ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☐ Yes. Fill in all of the information below.

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Debtor name Noah Corporation

United States Bankruptcy Court for the: DISTRICT OF UTAH

Case number (if known) 19-23840

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Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☐ No. Go to Part 2.

☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

			Total claim	Priority amount
2.1	<p>Priority creditor's name and mailing address</p> <p>Adams, Ariel S 324 SW 173rd St Oklahoma City, OK 73170</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$187.69	\$187.69
2.2	<p>Priority creditor's name and mailing address</p> <p>Adams, Shanise E 1019 Lincoln Ave Duquesne, PA 15110</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$234.93	\$234.93

Debtor	Name	Case number (if known)	19-23840	
2.3	<p>Priority creditor's name and mailing address</p> <p>Adney, Erin M 4346 W Mescal St Glendale, AZ 85304</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	\$1,227.83	\$1,227.83
2.4	<p>Priority creditor's name and mailing address</p> <p>Agan, Madison C 202 River Oaks Dr Lake Jackson, TX 77566</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	\$1,043.09	\$1,043.09
2.5	<p>Priority creditor's name and mailing address</p> <p>Aguillon, Santos A 2110 Orean St Houston, TX 77034</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	\$197.36	\$197.36
2.6	<p>Priority creditor's name and mailing address</p> <p>Aikins, Kayla N P O Box 14 Rowlett, TX 75030</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	\$1,204.56	\$1,204.56

Debtor	Name	Case number (if known)	19-23840
2.7	<p>Priority creditor's name and mailing address</p> <p>Alonso, Jose 4263 S Greenhaven St Wichita, KS 67216</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$45.80 \$45.80</p>
2.8	<p>Priority creditor's name and mailing address</p> <p>Ambrose, Alyson G 109 E 23rd St Houston, TX 77008</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$1,049.21 \$1,049.21</p>
2.9	<p>Priority creditor's name and mailing address</p> <p>Archibald, Parker D 1064 Sage Dr Pleasant Grove, UT 84062</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$226.44 \$226.44</p>
2.10	<p>Priority creditor's name and mailing address</p> <p>Am, Kaitlyn R 3261 Canterbury Dr Bay City, MI 48706</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$1,324.96 \$1,324.96</p>

Debtor	Name	Case number (if known)	19-23840
2.11	Priority creditor's name and mailing address Ashe, Jamie J 113 Camberwell Dr Pittsburgh, PA 15238	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$133.55 \$133.55
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.12	Priority creditor's name and mailing address Backer, Hanna J 15003 Davenport Cir Omaha, NE 68154	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,082.01 \$1,082.01
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.13	Priority creditor's name and mailing address Bacon, Kayley A 606 Timberbend Trl Allen, TX 75002	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$620.54 \$620.54
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.14	Priority creditor's name and mailing address Badalaty, Megan R 220 Mockingbird Dr Jeffersonville, IN 47130	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$670.89 \$670.89
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	Name	Case number (if known)	19-23840
2.15	<p>Priority creditor's name and mailing address</p> <p>Bafford, Megan E 8827 N Beards Bluff Ln Fair Grove, MO 65648</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><u>\$2,211.03</u> <u>\$2,211.03</u></p>
2.16	<p>Priority creditor's name and mailing address</p> <p>Bailey, Caitlin 72650 Omo Rd Richmond, MI 48062</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><u>\$2,924.29</u> <u>\$2,924.29</u></p>
2.17	<p>Priority creditor's name and mailing address</p> <p>Baker, Gary N 5796 Halton Gill Ln New Albany, OH 43054</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><u>\$120.38</u> <u>\$120.38</u></p>
2.18	<p>Priority creditor's name and mailing address</p> <p>Baker, Jeremy M 3801 Cherry Tree Ln Joliet, IL 60435</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><u>\$525.79</u> <u>\$525.79</u></p>

Debtor	Name	Case number (if known)	19-23840
2.19	<p>Priority creditor's name and mailing address</p> <p>Ballard, Mario 2323 Imogene St Memphis, TN 38114</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$101.60</p> <p>\$101.60</p>
2.20	<p>Priority creditor's name and mailing address</p> <p>Barker, Maria L 1266 Cox Mill Rd Concord, NC 28027</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$416.63</p> <p>\$416.62</p>
2.21	<p>Priority creditor's name and mailing address</p> <p>Barnes Gilliam, Rashia L 4807 Shafer St Norfolk, VA 23513</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$263.83</p> <p>\$263.83</p>
2.22	<p>Priority creditor's name and mailing address</p> <p>Barranco, Mary K 5792 Kevin Dr Nevada, TX 75173</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$456.49</p> <p>\$456.49</p>

Debtor	Name	Case number (if known)	19-23840
2.23	Priority creditor's name and mailing address Bateson, Torie A 3528 W Crab Apple Cir Taylorsville, UT 84129 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,119.81 \$1,119.81
2.24	Priority creditor's name and mailing address Bauman, Joshua Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$518.60 \$518.60
2.25	Priority creditor's name and mailing address Baylor, Thomas J 2015 Old Mountain Creek Rd Apt 3 Greenville, SC 29609 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$863.36 \$863.36
2.26	Priority creditor's name and mailing address Beardsley, Chandler 1201 Granbury Dr Allen, TX 75013 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$85.01 \$85.01

Debtor	Name	Case number (if known)	19-23840	
2.27	Priority creditor's name and mailing address Beedy, Charles R 2428 SW 91st St Oklahoma City, OK 73159	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$117.80	\$117.80
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.28	Priority creditor's name and mailing address Bender, Shelby R 3205 Rainier Dr Lawrence, KS 66047	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$172.80	\$172.80
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.29	Priority creditor's name and mailing address Bennett, Samuel R P O box 5329 Katy, TX 77449	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,216.22	\$1,216.22
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.30	Priority creditor's name and mailing address Bibbey, Sara N 2225 Palenque Dr SE Rio Rancho, NM 87124	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,024.24	\$1,024.24
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Name	Case number (if known)	19-23840
2.31	<p>Priority creditor's name and mailing address</p> <p>Bigler, Marlari S 5317 W Borglum Ln Herriman, UT 84096</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><u>\$1,276.81</u> <u>\$1,276.81</u></p>
2.32	<p>Priority creditor's name and mailing address</p> <p>Bird, Robyn W 1981 N Canyon Rd Apt 8 Provo, UT 84604</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><u>\$1,418.73</u> <u>\$1,418.73</u></p>
2.33	<p>Priority creditor's name and mailing address</p> <p>Blackman, Leah R 11534 Floyd Dr Apt 2505 Overland Park, KS 66210</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><u>\$769.98</u> <u>\$769.98</u></p>
2.34	<p>Priority creditor's name and mailing address</p> <p>Blanco, Ariana 423 W Myrtle Dr Chandler, AZ 85248</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><u>\$2,063.23</u> <u>\$2,063.23</u></p>

Debtor	Name	Case number (if known)	19-23840
2.35	<p>Priority creditor's name and mailing address</p> <p>Blaszczak, Eric C 1288 360th St Eastlake, OH 44095</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$118.49</p> <p>\$118.49</p>
2.36	<p>Priority creditor's name and mailing address</p> <p>Blevins, Chelsea E 1111 Abrams Rd Apt 110 Richardson, TX 75081</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$268.97</p> <p>\$268.97</p>
2.37	<p>Priority creditor's name and mailing address</p> <p>Bloomer, Kelsey D 315 Heidinger Dr Cary, NC 27511</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$1,360.34</p> <p>\$1,360.34</p>
2.38	<p>Priority creditor's name and mailing address</p> <p>Blouin, Mark R 309 Chatelaine Ct Willowbrook, IL 60527</p> <p>Date or dates debt was incurred 5/1/2019 to 6/1/2019</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$302.95</p> <p>\$302.95</p>

Debtor	Name	Case number (if known)	19-23840
2.39	Priority creditor's name and mailing address Bolkcom, Kenneth J 726 W Dwayne Dr Lehi, UT 84043	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$3,503.99 \$3,503.99
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.40	Priority creditor's name and mailing address Bosco, Emma 2813 N 110th Ct Apt 206 Omaha, NE 68164	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$224.00 \$224.00
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.41	Priority creditor's name and mailing address Bowens, Theresa L 8014 Clairmont Ave Rowlett, TX 75089	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$134.00 \$134.00
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.42	Priority creditor's name and mailing address Bower, Richard G 204 Page Ct Hurst, TX 76053	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$352.00 \$352.00
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	Name	Case number (if known)	19-23840	
2.43	Priority creditor's name and mailing address Bowser, Andrew	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,853.39	\$2,853.39
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.44	Priority creditor's name and mailing address Bowser, Marilyn 9555 East Raintree Dr. #1045 Scottsdale, AZ 85260	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$724.79	\$724.79
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.45	Priority creditor's name and mailing address Bowser, Mark 6444 Carrington Cir Sarasota, FL 34238	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$3,835.63	\$3,835.63
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.46	Priority creditor's name and mailing address Bowser, Michael 4055 Long Arrow St Concord, NC 28025	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$5,844.56	\$5,844.56
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Name	Case number (if known)	19-23840	
2.47	<p>Priority creditor's name and mailing address</p> <p>Bowser, Susanna 7970 Glenwild Dr Park City, UT 84098</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$11,068.68	\$11,068.68
2.48	<p>Priority creditor's name and mailing address</p> <p>Bowser, William 7970 Glenwild Dr Park City, UT 84098</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$26,480.77	\$13,650.00
2.49	<p>Priority creditor's name and mailing address</p> <p>Box, Alyssa N 4001 Nasa Pkwy Apt 228 El Lago, TX 77586</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$1,017.30	\$1,017.30
2.50	<p>Priority creditor's name and mailing address</p> <p>Bradley, Sean R 2201 Parklyn St Pittsburgh, PA 15234</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$184.22	\$184.22

Debtor	Name	Case number (if known)	19-23840	
2.51	Priority creditor's name and mailing address Brice, Michael G 52 S Helms St Lexington, TN 38351	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$366.79	\$366.79
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.52	Priority creditor's name and mailing address Broadway, Bria 199 S Lyndon St Apt A Greensboro, NC 27401	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$943.34	\$943.34
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.53	Priority creditor's name and mailing address Brooks, Arayiel R 1237 Nutting St Cedar Hill, TX 75104	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,852.69	\$1,852.69
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.54	Priority creditor's name and mailing address Brown, Hannalori K 525 W Deming Pl Apt 422 Chicago, IL 60614	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,060.53	\$1,060.53
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Name	Case number (if known)	19-23840
2.55	Priority creditor's name and mailing address Brown, Patrick D 4652 Tulip Creek Dr Memphis, TN 38135 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$202.62 \$202.62
2.56	Priority creditor's name and mailing address Burke, Joann R 7495 Summernote Dr Bartlett, TN 38133 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$176.67 \$176.67
2.57	Priority creditor's name and mailing address Burkhart, Amanda L 408 Warrior Ln Harriman, TN 37748 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$515.73 \$515.73
2.58	Priority creditor's name and mailing address Burnett, Brittany A 315 Raymond Rd Chester, NH 03036 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$537.25 \$537.25

Debtor	Name	Case number (if known)	19-23840	
2.59	Priority creditor's name and mailing address Burrow, Tristan D 11550 S FM 148 Scurry, TX 75158	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$1,184.51</u>	<u>\$1,184.51</u>
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.60	Priority creditor's name and mailing address Burton, Holly E 6 Julie Dr Little Rock, AR 72206	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$55.17</u>	<u>\$55.17</u>
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.61	Priority creditor's name and mailing address Bussell, Darius R 986 Rome Rochester, MI 48307	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$332.10</u>	<u>\$332.10</u>
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.62	Priority creditor's name and mailing address Butler, Brittney 2345 S Millwood St Wichita, KS 67213	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$6.26</u>	<u>\$6.26</u>
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Name	Case number (if known)	19-23840	
2.63	Priority creditor's name and mailing address Calma, Mary D 904 Keel St Birmingham, AL 35214 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$146.07</u>	<u>\$146.07</u>
2.64	Priority creditor's name and mailing address Campbell, Jady J 2323 N Woodlawn Blvd Apt 518 Wichita, KS 67220 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$111.78</u>	<u>\$111.78</u>
2.65	Priority creditor's name and mailing address Carter, Darren L. 108 E Plaza Blvd Apt 2083 Hurst, TX 76053 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$605.06</u>	<u>\$605.06</u>
2.66	Priority creditor's name and mailing address Carter, David W 20659 Stone Oak Pkwy Apt 410 San Antonio, TX 78258 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$491.79</u>	<u>\$491.79</u>

Debtor	Name	Case number (if known)	19-23840	
2.67	Priority creditor's name and mailing address Carter, Den'e L 108 E Plaza Blvd Apt 2083 Hurst, TX 76053	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$401.40	\$401.40
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.68	Priority creditor's name and mailing address Carter, Melissa A 5345 Wellington Pkwy Arvada, CO 80003	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$86.23	\$86.23
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.69	Priority creditor's name and mailing address Casseneuve, Michelle R 111 Lori Ann Ln Kingston, TN 37763	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$968.24	\$968.24
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.70	Priority creditor's name and mailing address Cerda, Ana 7001 Wildhaven Dr Apt 218 Fort Worth, TX 76137	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$961.95	\$961.95
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Name	Case number (if known)	19-23840
2.71	<p>Priority creditor's name and mailing address</p> <p>Chambliss, Dasha S 5308 Wycliffe Dr Little Rock, AR 72209</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$22.98 \$22.98</p>
2.72	<p>Priority creditor's name and mailing address</p> <p>Christman, Allison R 4304 Waterford Valley Dr Apt 1815 Durham, NC 27713</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$1,225.04 \$1,225.04</p>
2.73	<p>Priority creditor's name and mailing address</p> <p>Chuney, Pamela 21441 Westhampton St Oak Park, MI 48237</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$254.14 \$254.14</p>
2.74	<p>Priority creditor's name and mailing address</p> <p>Ciancibello, Tina 9283 Cherrystone Dr Mentor, OH 44060</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$1,111.35 \$1,111.35</p>

Debtor	Name	Case number (if known)	19-23840	
2.75	Priority creditor's name and mailing address Clark, Demetria L 2521 Marfa Ave Dallas, TX 75216	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$887.85	\$887.85
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.76	Priority creditor's name and mailing address Clarkston, Matthew B 112 E Plaza Blvd, Apt 2087 Hurst, TX 76053	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$400.24	\$400.24
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.77	Priority creditor's name and mailing address Clayton, Jonathan T 22511 Keystone Trl Katy, TX 77450	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,237.81	\$1,237.81
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.78	Priority creditor's name and mailing address Cobbs, Amelia C 10106 Technology Blvd W Apt 636 Dallas, TX 75220	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$93.75	\$93.75
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Name	Case number (if known)	19-23840	
2.79	Priority creditor's name and mailing address Cody, Bradrick S 5922 S Brenwood Dr Katy, TX 77449	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$668.70	\$668.70
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.80	Priority creditor's name and mailing address Coleman, Laurynda 3121 Parma Ln Plano, TX 75093	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$560.64	\$560.64
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.81	Priority creditor's name and mailing address Collier, Raysha 1901 W Germann Rd Apt 1057 Chandler, AZ 85286	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,157.01	\$1,157.01
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.82	Priority creditor's name and mailing address Conant, Shirley J 2901 Ridge Rd Missouri Valley, IA 51555	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$224.10	\$224.10
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Name	Case number (if known)	19-23840
2.83	<p>Priority creditor's name and mailing address</p> <p>Connelly, Shannon D 4311 Emerald Forest Dr Apt J Durham, NC 27713</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$104.07</p> <p>\$104.07</p>
2.84	<p>Priority creditor's name and mailing address</p> <p>Cook, Alexandra 339 Konawa Dr Dallas, TX 75217</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$287.32</p> <p>\$287.32</p>
2.85	<p>Priority creditor's name and mailing address</p> <p>Cook, Terri G 9295 S Wild Clover Ln West Jordan, UT 84081</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$1,261.76</p> <p>\$1,261.76</p>
2.86	<p>Priority creditor's name and mailing address</p> <p>Cooley, Katherine A 3305 Maverick St Virginia Beach, VA 23452</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$268.23</p> <p>\$268.23</p>

Debtor	Name	Case number (if known)	19-23840	
2.87	Priority creditor's name and mailing address Cooper, Lindsee	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$905.55	\$905.55
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.88	Priority creditor's name and mailing address Copper, Brittany N 3711 Walnut St Kansas City, MO 64111	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$234.51	\$234.51
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.89	Priority creditor's name and mailing address Cortez, Amanda L 12800 Applewhite Rd Unit 146 San Antonio, TX 78224	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$15.43	\$15.43
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.90	Priority creditor's name and mailing address Covarrubias, Jasson 7350 E Stetson Dr Unit 1034 Scottsdale, AZ 85251	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$296.55	\$296.55
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Name	Case number (if known)	19-23840
2.91	Priority creditor's name and mailing address Crowell, Vince C 8527 Palomar Ave NE Albuquerque, NM 87109	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,097.38 \$1,097.38
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.92	Priority creditor's name and mailing address Cruz, Victor 660 Oriole Ct Apt 1A Grayslake, IL 60030	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$82.54 \$82.54
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.93	Priority creditor's name and mailing address Curtis, Danielle N 203 Gum Ct Suffolk, VA 23435	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$922.38 \$922.38
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.94	Priority creditor's name and mailing address Dalton, Alexis P 927 Kanoy Rd Lot 11 Thomasville, NC 27360	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$130.98 \$130.98
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	Name	Case number (if known)	19-23840
2.95	<p>Priority creditor's name and mailing address</p> <p>Danze, Shannon E 10152 Chipmunk Ridge Dr Concord Township, OH 44077</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$122.02 \$122.02</p>
2.96	<p>Priority creditor's name and mailing address</p> <p>Datcher, Rouglas J 800 Northcrest Dr Birmingham, AL 35235</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$98.47 \$98.47</p>
2.97	<p>Priority creditor's name and mailing address</p> <p>Davis, Marsha 331 Fairwood St Inkster, MI 48141</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$186.65 \$186.65</p>
2.98	<p>Priority creditor's name and mailing address</p> <p>Dennison, Dylan J 722 South 1490 West Orem, UT 84058</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$38.57 \$38.57</p>

Debtor	Name	Case number (if known)	19-23840
2.99	Priority creditor's name and mailing address Dennison, Monica L 722 South 1490 West Orem, UT 84058	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,198.80 \$1,198.80
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.100	Priority creditor's name and mailing address Denson, Debra L 3122 Hunsinger Blvd Louisville, KY 40220	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$278.58 \$278.58
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.101	Priority creditor's name and mailing address Deppe, Megan G 1008 11th Ave SE Altoona, IA 50009	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$248.84 \$248.84
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.102	Priority creditor's name and mailing address Dillman-Crump, Denise 760 West 10 North Lindon, UT 84042	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$6,142.12 \$6,142.12
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	Name	Case number (if known)	19-23840	
2.103	Priority creditor's name and mailing address Dinickle, Felicia A 4115 E 57th St Cleveland, OH 44105 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$371.48	\$371.48
2.104	Priority creditor's name and mailing address Dreesman, Kayla A 123 Porchard Ln Knotts Island, NC 27950 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$941.20	\$941.20
2.105	Priority creditor's name and mailing address Duffey, Jimmie L 6378 S 80th East Ave Apt C Tulsa, OK 74133 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$61.71	\$61.71
2.106	Priority creditor's name and mailing address Duran, Marc D 28378 N Crimm Rd Queen Creek, AZ 85143 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$371.52	\$371.52

Debtor	Name	Case number (if known)	19-23840
2.107	Priority creditor's name and mailing address Duran-Maldonado, Juana 1715 Camellia St Wharton, TX 77488 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$503.92 \$503.92
2.108	Priority creditor's name and mailing address Edwards, Ronjenika 3428 Ellis Ave SW Birmingham, AL 35221 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$386.22 \$386.22
2.109	Priority creditor's name and mailing address Ehrmann, Benjamin J 3137 Pinecrest Way Auburn Hills, MI 48326 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$274.18 \$274.18
2.110	Priority creditor's name and mailing address Endres, Paige 807 N Madison St Waunakee, WI 53597 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,475.98 \$1,475.98

Debtor	Name	Case number (if known)	19-23840	
2.111	Priority creditor's name and mailing address English, Ashley T 4631 Oak Pointe Dr Louisville, KY 40245 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$378.19	\$378.19
2.112	Priority creditor's name and mailing address English, Darin E 5321 Oaklawn Park Dr Louisville, KY 40299 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$367.09	\$367.09
2.113	Priority creditor's name and mailing address Enlow, Markez D 216 Tanglewood Dr Gurnee, IL 60031 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12.86	\$12.86
2.114	Priority creditor's name and mailing address Estes, Kathryn Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$249.30	\$249.30

Debtor	Name	Case number (if known)	19-23840	
2.115	Priority creditor's name and mailing address Etienne, Miriam M 1030 E Gaylord St Mount Pleasant, MI 48858 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$948.87	\$948.87
2.116	Priority creditor's name and mailing address Faison, Tiffany P 506 Yukon Dr Greenville, SC 29605 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$50.45	\$50.45
2.117	Priority creditor's name and mailing address Farone, James J 507 Moravia Rd New Galilee, PA 16141 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$62.74	\$62.74
2.118	Priority creditor's name and mailing address Fazendin, Krista L 2512 Bar Harbour Ct Naperville, IL 60564 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,290.59	\$1,290.59

Debtor	Name	Case number (if known)	19-23840
2.119	<p>Priority creditor's name and mailing address</p> <p>Fears, Leia P 822 N 94th Plz Apt 3 Omaha, NE 68114</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$76.69 \$76.69</p>
2.120	<p>Priority creditor's name and mailing address</p> <p>Ferrari, Kathy L 4820 NE Megan Lane Ankeny, IA 50021</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wage</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$1,292.59 \$1,292.59</p>
2.121	<p>Priority creditor's name and mailing address</p> <p>Feuerhelm, Brett N 1833 80th St Windsor Heights, IA 50324</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$116.36 \$116.36</p>
2.122	<p>Priority creditor's name and mailing address</p> <p>Fishell, Alexandra D 1026 N Oakland Blvd Apt 12 Waterford, MI 48327</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$358.02 \$358.02</p>

Debtor	Name	Case number (if known)	19-23840	
2.123	Priority creditor's name and mailing address Fleet, Codi M 212 E Beaver St Zelienople, PA 16063 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,877.25	\$1,877.25
2.124	Priority creditor's name and mailing address Fleming, James E 121 Spring St McMurray, PA 15317 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$25.71	\$25.71
2.125	Priority creditor's name and mailing address Flores, Jorge 826 South 1840 West Orem, UT 84058 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$297.00	\$297.00
2.126	Priority creditor's name and mailing address Floyd, Katie B 122 Creedmore Dr Statesville, NC 28625 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$896.37	\$896.37

Debtor	Name	Case number (if known)	19-23840	
2.127	Priority creditor's name and mailing address Frandle, Bethany R 681 McKay Way Apt G Waterloo, WI 53594	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$61.71</u>	<u>\$61.71</u>
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.128	Priority creditor's name and mailing address Franklin, Taimira 588 Ceresia Ct Pickerington, OH 43147	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$103.05</u>	<u>\$103.05</u>
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.129	Priority creditor's name and mailing address Frazier, Kathy D 9068 Vickroy Ter Oviedo, FL 32765	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$1,245.34</u>	<u>\$1,245.34</u>
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.130	Priority creditor's name and mailing address Freeman, Daveonna D 1604 Luckenbach Dr Forney, TX 75126	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$161.65</u>	<u>\$161.65</u>
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Name	Case number (if known)	19-23840
2.131	Priority creditor's name and mailing address Fulcher, Kelly M 1456 E Pecos Rd Apt 3099 Gilbert, AZ 85295	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$875.63 \$875.63
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.132	Priority creditor's name and mailing address Furra, Joshua R 913 SW 41st St Oklahoma City, OK 73160	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,362.71 \$1,362.71
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.133	Priority creditor's name and mailing address Gaiters, Joseph M 11769 Riverwood Ct South Lyon, MI 48178	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$439.14 \$439.14
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.134	Priority creditor's name and mailing address Garcia, Cecelia 7525 Holly Hill Dr Apt 18 Dallas, TX 75231	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$970.64 \$970.64
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	Name	Case number (if known)	19-23840	
2.135	Priority creditor's name and mailing address Garcia, Rene F 715 Suncrest Dr Aurora, IL 60506 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$748.93	\$748.93
2.136	Priority creditor's name and mailing address Gardner, Hayley 4646 W Serendipity Way South Jordan, UT 84009 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,058.71	\$5,058.71
2.137	Priority creditor's name and mailing address Gary, Precious N 3656 Woodford Rd Apt 302 Cincinnati, OH 45213 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$172.18	\$172.18
2.138	Priority creditor's name and mailing address Geter, Anjewan 9321 Bothwell St Apt 304 Raleigh, NC 27617 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$444.23	\$444.23

Debtor	Name	Case number (if known)	19-23840
2.139	<p>Priority creditor's name and mailing address</p> <p>Gibson, Ashley N 810 Aspen Ln DeSoto, TX 75115</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>\$500.64</p> <p>\$500.64</p>
2.140	<p>Priority creditor's name and mailing address</p> <p>Gladden, Chevin M 5015 Kenton Vw San Antonio, TX 78240</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>\$1,258.97</p> <p>\$1,258.97</p>
2.141	<p>Priority creditor's name and mailing address</p> <p>Gladney, Willie M 5492 Harvey Hill Dr Memphis, TN 38141</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>\$222.06</p> <p>\$222.06</p>
2.142	<p>Priority creditor's name and mailing address</p> <p>Glatz, Elaine E 3211 Juniper Dr McKinney, TX 75070</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>\$1,429.33</p> <p>\$1,429.33</p>

Debtor	Name	Case number (if known)	19-23840
2.143	<p>Priority creditor's name and mailing address</p> <p>Goins, Crystal N 50 Villa Vista Loop Little Rock, AR 72204</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$760.89</p> <p>\$760.89</p>
2.144	<p>Priority creditor's name and mailing address</p> <p>Gonzales, Adelia L 4612 30th St Dickinson, TX 77539</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$352.64</p> <p>\$352.64</p>
2.145	<p>Priority creditor's name and mailing address</p> <p>Goodwin, Shelby M 8659 W Mineral Point Rd Cross Plains, WI 53528</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$702.93</p> <p>\$702.93</p>
2.146	<p>Priority creditor's name and mailing address</p> <p>Gordon, Gregory 2509 Old Forge Dr Little Rock, AR 72227</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$965.06</p> <p>\$965.06</p>

Debtor	Name	Case number (if known)	19-23840
2.147	<p>Priority creditor's name and mailing address</p> <p>Green, Karen N 13066 Alpine Cir Mc Calla, AL 35111</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>\$56.89</p> <p>\$56.89</p>
2.148	<p>Priority creditor's name and mailing address</p> <p>Green, Kelly A 8508 Ambrosse Ln Unit 101 Louisville, KY 40299</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>\$1,365.67</p> <p>\$1,365.67</p>
2.149	<p>Priority creditor's name and mailing address</p> <p>Green, Robert J 705 Duncan Ave Apt 321 Pittsburgh, PA 15237</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>\$139.47</p> <p>\$139.47</p>
2.150	<p>Priority creditor's name and mailing address</p> <p>Greer, Marvin 690 Zachary Dr Romeoville, IL 60446</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>\$285.81</p> <p>\$285.81</p>

Debtor	Name	Case number (if known)	19-23840	
2.151	Priority creditor's name and mailing address Grose, George E 11129 Park Vista Dr Northglenn, CO 80234 <hr/> Date or dates debt was incurred 5/1/19 to 6/1/19 <hr/> Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <hr/> Basis for the claim: Wages <hr/> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$142.33	\$142.33
2.152	Priority creditor's name and mailing address Gunter, Rechelle 1802 E 66th Pl #202 Tulsa, OK 74136 <hr/> Date or dates debt was incurred 5/1/19 to 6/1/19 <hr/> Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <hr/> Basis for the claim: Wages <hr/> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,231.78	\$1,231.78
2.153	Priority creditor's name and mailing address Gutierrez, Kristin D 30808 Sheridan St Garden City, MI 48135 <hr/> Date or dates debt was incurred 5/1/19 to 6/1/19 <hr/> Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <hr/> Basis for the claim: Wages <hr/> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,199.18	\$1,199.18
2.154	Priority creditor's name and mailing address Gutierrez, Yusmery Y 17033 Butte Creek Rd Apt 106 Houston, TX 77090 <hr/> Date or dates debt was incurred 5/1/19 to 6/1/19 <hr/> Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <hr/> Basis for the claim: Wages <hr/> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,152.37	\$1,152.37

Debtor	Name	Case number (if known)	19-23840
2.155	<p>Priority creditor's name and mailing address</p> <p>Hafen, Konnor A 10464 S Jordan Gtwy Unit 348 South Jordan, UT 84095</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$1,025.15 \$1,025.15</p>
2.156	<p>Priority creditor's name and mailing address</p> <p>Hahn, Malarie G 1608 Indian Hollow Dr Idaho Falls, ID 83401</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$873.08 \$873.08</p>
2.157	<p>Priority creditor's name and mailing address</p> <p>Haileslassie, Saba M 13555 Kit Ln Apt 137 Dallas, TX 75240</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$101.98 \$101.98</p>
2.158	<p>Priority creditor's name and mailing address</p> <p>Hall, Tanner K 478 West 175 North Orem, UT 84057</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$142.84 \$142.84</p>

Debtor	Name	Case number (if known)	19-23840	
2.159	Priority creditor's name and mailing address Hanley, Sheena L 2451 Edgebrook Ave Pittsburgh, PA 15226 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,512.00	\$1,512.00
2.160	Priority creditor's name and mailing address Harper, Kaylia 6524 Sheridan Cir Fort Worth, TX 76107 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,551.16	\$1,551.16
2.161	Priority creditor's name and mailing address Hawk, John A 1763 South 1780 East Spanish Fork, UT 84660 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,619.72	\$1,619.72
2.162	Priority creditor's name and mailing address Hayner, Kristina B 15 Iron Horse Dr Unit D305 Bedford, NH 03110 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$52.92	\$52.92

Debtor	Name	Case number (if known)	19-23840	
2.163	Priority creditor's name and mailing address Haynes, Oteasha N 260 Walcott Dr Lyman, SC 29365	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$354.46</u>	<u>\$354.46</u>
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.164	Priority creditor's name and mailing address Hazelton, Christine J 209 Flintstone Ln Universal City, TX 78148	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$406.41</u>	<u>\$406.41</u>
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.165	Priority creditor's name and mailing address Hedges, James W 401 Frostwood Rd Shelbyville, KY 40065	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$16.07</u>	<u>\$16.07</u>
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.166	Priority creditor's name and mailing address Heinrich, Amy E 1000 Speer Blvd Denver, CO 80204	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$64.02</u>	<u>\$64.02</u>
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Name	Case number (if known)	19-23840
2.167	<p>Priority creditor's name and mailing address</p> <p>Henderson, Brian D 1881 W Traverse Pkwy Ste E #501 Lehi, UT 84043</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$1,316.23</p> <p>\$1,316.23</p>
2.168	<p>Priority creditor's name and mailing address</p> <p>Henderson, Brittany L 501 Crepe Myrtle Loop Cabot, AR 72023</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$1,396.02</p> <p>\$1,396.02</p>
2.169	<p>Priority creditor's name and mailing address</p> <p>Hess, Ushya J 1121 N 44th St Unit 1024 Phoenix, AZ 85008</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$363.15</p> <p>\$363.15</p>
2.170	<p>Priority creditor's name and mailing address</p> <p>Hession, Christopher C 13110 Birch Dr Ste 148 Omaha, NE 68164</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$404.04</p> <p>\$404.04</p>

Debtor	Name	Case number (if known)	19-23840	
2.171	Priority creditor's name and mailing address Hession, Deborah L 4376 S 152nd Cir Omaha, NE 68137	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$120.43	\$120.43
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.172	Priority creditor's name and mailing address Hilby, Isaac W 4798 Orchard Ln Rockford, IL 61101	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$377.10	\$377.10
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.173	Priority creditor's name and mailing address Hilger, Morgan E 2641 N Miranda Ave Fayetteville, AR 72703	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,228.27	\$1,228.27
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.174	Priority creditor's name and mailing address Hill, Elijah D 88 Sheridan Ave Apt 207 Pittsburgh, PA 15202	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,374.73	\$1,374.73
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Name	Case number (if known)	19-23840	
2.175	Priority creditor's name and mailing address Hill, Zoie M 4908 Farley St Merriam, KS 66203	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$678.45	\$678.45
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.176	Priority creditor's name and mailing address Hinkle, David 635 Waukegan Rd Deerfield, IL 60015	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,280.76	\$1,280.76
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.177	Priority creditor's name and mailing address Hodges, Chelsea D 3330 Springhill Dr Missouri City, TX 77459	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,484.16	\$1,484.16
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.178	Priority creditor's name and mailing address Hoffman, Taylor 2916 Sidney St Saint Louis, MO 63104	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,333.64	\$2,333.64
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Name	Case number (if known)	19-23840
2.179	<p>Priority creditor's name and mailing address</p> <p>Holker, Kristi L 933 East 300 North Lindon, UT 84042</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$1,220.19</p> <p>\$1,220.19</p>
2.180	<p>Priority creditor's name and mailing address</p> <p>Holt, Claire E 5859 S Village Way Greenwood Village, CO 80121</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$1,344.42</p> <p>\$1,344.42</p>
2.181	<p>Priority creditor's name and mailing address</p> <p>Honsberger-Deyo, Daniel E 2618 S Minnesota Ave Wichita, KS 67216</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$166.44</p> <p>\$166.44</p>
2.182	<p>Priority creditor's name and mailing address</p> <p>Hoover, Darren J 4100 S Date Ave Broken Arrow, OK 74011</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$637.48</p> <p>\$637.48</p>

Debtor	Name	Case number (if known)	19-23840
2.183	<p>Priority creditor's name and mailing address</p> <p>Hoover, Sharon L 4100 S Date Ave Broken Arrow, OK 74011</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>\$116.39</p> <p>\$116.39</p>
2.184	<p>Priority creditor's name and mailing address</p> <p>Houghtalin, Brian G 3918 Presbyterian Rd Greensboro, NC 27406</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>\$304.68</p> <p>\$304.68</p>
2.185	<p>Priority creditor's name and mailing address</p> <p>Howard, Brianna L 3512 Peppervine Dr Orlando, FL 32828</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>\$833.71</p> <p>\$833.71</p>
2.186	<p>Priority creditor's name and mailing address</p> <p>Hubbard, David 1595 East 400 South Pleasant Grove, UT 84062</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>\$1,414.29</p> <p>\$1,414.29</p>

Debtor	Name	Case number (if known)	19-23840
2.187	Priority creditor's name and mailing address Hughes, Alexandris D 5100 USAA Blvd Apt 1619 San Antonio, TX 78240	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$307.97 \$307.90
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.188	Priority creditor's name and mailing address Hurston, Paris D 201 McKinney Village Pkwy McKinney, TX 75069	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$267.40 \$267.40
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.189	Priority creditor's name and mailing address Ickowitz, Jamie J 3901 Wolcott Ave Des Moines, IA 50321	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$263.13 \$263.13
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.190	Priority creditor's name and mailing address Ingles, Alma L 871 Lake Carolyn Pkwy Apt 301 Irving, TX 75039	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$40.31 \$40.31
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	Name	Case number (if known)	19-23840	
2.191	Priority creditor's name and mailing address Internal Revenue Service Centralized Insolvency Operations P O Box 7346 Philadelphia, PA 19101-7346	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$0.00
	Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Basis for the claim: Taxes Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.192	Priority creditor's name and mailing address Jackson, Jacqueline J 3540 Petunia Cres Virginia Beach, VA 23453	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,689.04	\$1,689.04
	Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.193	Priority creditor's name and mailing address Jacobs, Demond	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$265.17	\$265.17
	Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.194	Priority creditor's name and mailing address Jenning, Elex 2743 Fletcher View Dr Cordova, TN 38016	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$343.08	\$343.08
	Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Name	Case number (if known)	19-23840	
2.195	Priority creditor's name and mailing address Jensen, Brandon 602 East 5640 South Murray, UT 84107	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$6,183.53	\$6,183.53
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.196	Priority creditor's name and mailing address Jensen, Kathren 127 West 5878 South Murray, UT 84107	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$13,450.55	\$13,450.55
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.197	Priority creditor's name and mailing address Jensen, Scott 127 West 5878 South Murray, UT 84107	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$6,346.15	\$6,346.15
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.198	Priority creditor's name and mailing address Johannes, Sasha 365 Forestway Cir Unit 108 Altamonte Springs, FL 32701	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,220.85	\$1,220.85
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Name	Case number (if known)	19-23840
2.199	<p>Priority creditor's name and mailing address</p> <p>Johnson, April K 7478 S Red Heather Ln West Jordan, UT 84084</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>	<p>\$2,056.19 \$2,056.19</p>
	<p>Date or dates debt was incurred</p> <p>5/1/19 to 6/1/19</p>	<p>Basis for the claim:</p> <p>Wages</p>	
	<p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	
2.200	<p>Priority creditor's name and mailing address</p> <p>Johnson, Ashly M 211 S Wade Ave Washington, PA 15301</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>	<p>\$354.09 \$354.09</p>
	<p>Date or dates debt was incurred</p> <p>5/1/19 to 6/1/19</p>	<p>Basis for the claim:</p> <p>Wages</p>	
	<p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	
2.201	<p>Priority creditor's name and mailing address</p> <p>Johnson, Tori N 152 Waterford Cir Frankfort, KY 40601</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>	<p>\$1,234.00 \$1,234.00</p>
	<p>Date or dates debt was incurred</p> <p>5/1/19 to 6/1/19</p>	<p>Basis for the claim:</p> <p>Wages</p>	
	<p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	
2.202	<p>Priority creditor's name and mailing address</p> <p>Jones, Devin 1211 East 6200 South Murray, UT 84121</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>	<p>\$3,088.47 \$3,088.47</p>
	<p>Date or dates debt was incurred</p> <p>5/1/19 to 6/1/19</p>	<p>Basis for the claim:</p> <p>Wages</p>	
	<p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	

Debtor	Name	Case number (if known)	19-23840
2.203	Priority creditor's name and mailing address Jones, Jontae B 878 Kenwick Rd Columbus, OH 43209	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$230.73 \$230.73
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.204	Priority creditor's name and mailing address Jones, Michael A 201 S Lyndon St Greensboro, NC 27401	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,434.70 \$1,434.70
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.205	Priority creditor's name and mailing address Jones, Monica L 133 Tonkawa Canyon Dr La Marque, TX 77568	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$221.45 \$221.45
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.206	Priority creditor's name and mailing address Jones, William C 101 Nokomis Dr Washington, PA 15301	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$517.52 \$517.52
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	Name	Case number (if known)	19-23840
2.207	<p>Priority creditor's name and mailing address</p> <p>Jones-Mayfield, Juin V 841 E Alpha Pkwy Waterford, MI 48328</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$233.74</p> <p>\$233.74</p>
2.208	<p>Priority creditor's name and mailing address</p> <p>Jordan, Julie D 46 Gem Ct Elizabethtown, KY 42701</p> <p>Date or dates debt was incurred 4/1/19 to 5/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$1,731.82</p> <p>\$1,731.82</p>
2.209	<p>Priority creditor's name and mailing address</p> <p>Jordan, Katelynne S 4425 South Scenic Lake Dr Orlando, FL 32808</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$252.22</p> <p>\$252.22</p>
2.210	<p>Priority creditor's name and mailing address</p> <p>Jorgensen, Jake A 1656 North 645 West Orem, UT 84057</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$1,432.66</p> <p>\$1,432.66</p>

Debtor	Name	Case number (if known)	19-23840
2.211	Priority creditor's name and mailing address Juarez, Oscar 4218 Simmons Dr Rowlett, TX 75088 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$179.13 \$179.13
2.212	Priority creditor's name and mailing address Kalitta, Sarah 2323 N Woodlawn Blvd Apt 518 Wichita, KS 67220 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,005.47 \$1,005.47
2.213	Priority creditor's name and mailing address Kantor, Macala E 3725 Daffodil Ln McKinney, TX 75070 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$411.36 \$411.36
2.214	Priority creditor's name and mailing address Katella, Kayla E 1523 Tolma Ave Pittsburgh, PA 15216 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,167.46 \$1,167.46

Debtor	Name	Case number (if known)	19-23840	
2.215	Priority creditor's name and mailing address Keene, Shawn T. 1006 E 5th Ave Winfield, KS 67156	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$121.23	\$121.23
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.216	Priority creditor's name and mailing address Kees, John 3759 Robin Hood Way Madison, WI 53718	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$19.13	\$19.13
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.217	Priority creditor's name and mailing address Kela, Jessica 6739 Oakdale Rd Mentor, OH 44060	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$329.67	\$329.67
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.218	Priority creditor's name and mailing address Keller, Jessica S 7309 W Hampden Ave Apt 5001 Lakewood, CO 80227	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$118.41	\$118.41
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Name	Case number (if known)	19-23840	
2.219	<p>Priority creditor's name and mailing address</p> <p>Kemp, Samantha R 100 S Geneva Rd Apt D207 Orem, UT 84059</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$1,314.39	\$1,314.39
2.220	<p>Priority creditor's name and mailing address</p> <p>Kenefick, Kayla M 1100 Pegram St Charlotte, NC 28205</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$1,266.71	\$1,266.71
2.221	<p>Priority creditor's name and mailing address</p> <p>Kennedy, Corey A 524 Finks Run Rd Mc Donald, PA 15057</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$47.65	\$47.65
2.222	<p>Priority creditor's name and mailing address</p> <p>Kennedy, Samuel L 6805 Moorhampton Dr Louisville, KY 40228</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$211.80	\$211.80

Debtor	Name	Case number (if known)	19-23840
2.223	Priority creditor's name and mailing address King, Leilani N 640 N Church St Apt 511 Charlotte, NC 28202	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$164.00 \$164.00
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.224	Priority creditor's name and mailing address King, Sharonda L 3106 Elim Estates Dr Columbus, OH 43232	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$276.90 \$276.90
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.225	Priority creditor's name and mailing address Knowles, Kellie J 12515 E Birchwood Dr Wichita, KS 67206	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$721.82 \$721.82
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.226	Priority creditor's name and mailing address Kozak, Janna L 8610 Ep True Pkwy Unit 2003 West Des Moines, IA 50266	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$410.57 \$410.57
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	Name	Case number (if known)	19-23840
2.227	<p>Priority creditor's name and mailing address</p> <p>Kramer, Jonathon D 5000 K Ave Plano, TX 75074</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$152.61</p> <p>\$152.61</p>
2.228	<p>Priority creditor's name and mailing address</p> <p>Krasinski, Amanda J 865 Oviedo Blvd Apt 210 Oviedo, FL 32765</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$896.31</p> <p>\$896.31</p>
2.229	<p>Priority creditor's name and mailing address</p> <p>Kurtz, Hannah M 4604 Raleigh Rd Clayton, NC 27520</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$1,197.73</p> <p>\$1,197.73</p>
2.230	<p>Priority creditor's name and mailing address</p> <p>LaReau, Scott R 1073 Grand National Blvd Fort Worth, TX 76179</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$371.83</p> <p>\$371.83</p>

Debtor	Name	Case number (if known)	19-23840
2.231	Priority creditor's name and mailing address Lasko, Howard B 2803 Shorewood Dr McHenry, IL 60050	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$203.53 \$203.53
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.232	Priority creditor's name and mailing address Lasseter, Kristi	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$350.33 \$350.33
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.233	Priority creditor's name and mailing address Lemus, Jessenia A 2307 Gable Hollow Ln Katy, TX 77450	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$312.60 \$312.60
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.234	Priority creditor's name and mailing address Leon, Maritza 1400 Patricia Apt 201 San Antonio, TX 78213	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,050.19 \$1,050.19
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	Name	Case number (if known)	19-23840
2.235	<p>Priority creditor's name and mailing address</p> <p>Lester, Maddison J 10948 S Shilling Ave Apt 1113 South Jordan, UT 84095</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$785.93</p> <p>\$785.93</p>
2.236	<p>Priority creditor's name and mailing address</p> <p>Licursi, Anthony 8247 Talbot Cir Mentor, OH 44060</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$287.65</p> <p>\$287.65</p>
2.237	<p>Priority creditor's name and mailing address</p> <p>Logan, Jarred 5818 US Highway 70 W Durham, NC 27705</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$374.63</p> <p>\$374.63</p>
2.238	<p>Priority creditor's name and mailing address</p> <p>Lott, Bria D 2823 Woodmere Dr Dallas, TX 75233</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$1,060.75</p> <p>\$1,060.75</p>

Debtor	Name	Case number (if known)	19-23840	
2.239	Priority creditor's name and mailing address Lowder, Cory M	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$9,351.37</u>	<u>\$9,351.37</u>
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.240	Priority creditor's name and mailing address Lucas Lawton, Charity D 3406 Winchester Dr Portsmouth, VA 23707	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$346.52</u>	<u>\$346.52</u>
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.241	Priority creditor's name and mailing address Lucas, Cassandra E 14 Eastman St Apt 5 Concord, NH 03301	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$90.84</u>	<u>\$90.84</u>
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.242	Priority creditor's name and mailing address Lukowski, Caitlin N 453 Burr Oak Dr Oswego, IL 60543	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$1,253.83</u>	<u>\$1,253.83</u>
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Name	Case number (if known)	19-23840	
2.243	Priority creditor's name and mailing address Lund, Katie A 2020 Pleasant Dr Cambridge, WI 53523	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$154.30</u>	<u>\$154.30</u>
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.244	Priority creditor's name and mailing address Lynn, Leah P 8601 Potomac Blvd Charlotte, NC 28216	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$97.23</u>	<u>\$97.23</u>
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.245	Priority creditor's name and mailing address MacDavid, Willie 4633 Huckleberry Cv Memphis, TN 38109	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$353.01</u>	<u>\$353.01</u>
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.246	Priority creditor's name and mailing address Maddox, Bryce 106 Walnut Ave Yukon, OK 73099	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$66.78</u>	<u>\$66.78</u>
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Name	Case number (if known)	19-23840
2.247	Priority creditor's name and mailing address Maldonado, Roberto C 1715 Camellia St Wharton, TX 77488 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$503.70 \$503.70
2.248	Priority creditor's name and mailing address Mann, Alyssa R 2057 Highfield Rd Waterford, MI 48329 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$249.11 \$249.11
2.249	Priority creditor's name and mailing address Marcel, Tom E 943 Robinhood Ave Painesville, OH 44077 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$185.30 \$185.30
2.250	Priority creditor's name and mailing address Marion, Desiree 11104 Courville St Detroit, MI 48224 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$979.37 \$979.37

Debtor	Name	Case number (if known)	19-23840
2.251	<p>Priority creditor's name and mailing address</p> <p>Marquez, Favian 305 Trotting Trl Osteen, FL 32764</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$444.93</p> <p>\$444.93</p>
2.252	<p>Priority creditor's name and mailing address</p> <p>Marshall, Lavonda S 223 Roberts Cir Arlington, TX 76010</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$406.74</p> <p>\$406.74</p>
2.253	<p>Priority creditor's name and mailing address</p> <p>Marten, Melissa R 1451 24th St Apt 476 Denver, CO 80205</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$1,377.70</p> <p>\$1,377.70</p>
2.254	<p>Priority creditor's name and mailing address</p> <p>Martin, Kala</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$349.55</p> <p>\$349.55</p>

Debtor	Name	Case number (if known)	19-23840
2.255	Priority creditor's name and mailing address Martinez, Kylie M P O Box 970412 Orem, UT 84097	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,942.78 \$1,942.78
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.256	Priority creditor's name and mailing address Mason, Adelle L 1171 Mammoth Rd Unit A Pelham, NH 03076	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,022.60 \$1,022.60
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.257	Priority creditor's name and mailing address McAlmont, Camille E 3782 N Prairie Grass Dr Lehi, UT 84043	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,723.38 \$1,723.38
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.258	Priority creditor's name and mailing address McClelland, Danielle T 16465 Henderson Pass Apt 111 San Antonio, TX 78232	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,127.61 \$1,127.61
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	Name	Case number (if known)	19-23840	
2.259	<p>Priority creditor's name and mailing address</p> <p>McCorvey, Bella 461 West 13490 South Draper, UT 84020</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	\$3,329.53	\$3,329.53
2.260	<p>Priority creditor's name and mailing address</p> <p>McDuffie, Amanda 36091 N Grand Oaks Ct Apt G01 Gurnee, IL 60031</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	\$247.17	\$247.17
2.261	<p>Priority creditor's name and mailing address</p> <p>McGrath, Brianna E 51 Biviera Rd Hudson, NH 03051</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	\$1,058.58	\$1,058.58
2.262	<p>Priority creditor's name and mailing address</p> <p>McGuire, Carolyn 4909 Coral Creek Dr Fort Worth, TX 76135</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	\$470.06	\$470.06

Debtor	Name	Case number (if known)	19-23840	
2.263	Priority creditor's name and mailing address McIntire, Aaron D 503 El Dorado Blvd Apt 701 Webster, TX 77598	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$627.22	\$627.22
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.264	Priority creditor's name and mailing address McKell, Annabelle L 1070 Cox Mill Rd Concord, NC 28027	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,183.47	\$1,183.47
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.265	Priority creditor's name and mailing address McKell, Mitchell T 1070 Cox Mill Rd Concord, NC 28027	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$615.44	\$615.44
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.266	Priority creditor's name and mailing address McLean, Ebony 915 Delaronde Ln Morrisville, NC 27560	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$422.94	\$422.94
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Name	Case number (if known)	19-23840	
2.267	Priority creditor's name and mailing address McMillan, Daniel W 187 Head St Manchester, NH 03102	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$948.57	\$948.57
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.268	Priority creditor's name and mailing address McNall, David K 1538 Barnes Ave South Park, PA 15129	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$40.85	\$40.85
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.269	Priority creditor's name and mailing address McNeill, Heather S 13931 E 106th Pl Commerce City, CO 80022	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$92.80	\$92.80
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.270	Priority creditor's name and mailing address Medlock, Laura 254 North 700 West Apt 3 Provo, UT 84601	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$61.71	\$61.71
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Name	Case number (if known)	19-23840
2.271	Priority creditor's name and mailing address Meeker, Lindsey M 12700 E 100th St N Apt 2201 Owasso, OK 74055 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,459.07 \$1,459.07
2.272	Priority creditor's name and mailing address Meeker, Nicole M 32727 Lake Shore Blvd Eastlake, OH 44095 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,278.88 \$1,278.88
2.273	Priority creditor's name and mailing address Mena, Jose A 610 Stoneledge Dr Friendswood, TX 77546 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$146.31 \$146.31
2.274	Priority creditor's name and mailing address Mendez, Diana 2210 Arbor Loop Dr Apt 15108 Charlotte, NC 28217 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,154.46 \$1,154.46

Debtor	Name	Case number (if known)	19-23840
2.275	<p>Priority creditor's name and mailing address</p> <p>Mercer, Wyborn S 699 Perrin Dr Spartanburg, SC 29307</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$58.50</p> <p>\$58.50</p>
2.276	<p>Priority creditor's name and mailing address</p> <p>Merin Garcia, Teresa G 7525 Runner St Yukon, OK 73099</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$654.18</p> <p>\$654.18</p>
2.277	<p>Priority creditor's name and mailing address</p> <p>Mersfelder, Brittany R 6311 Ross Rd Fairfield, OH 45014</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$1,045.71</p> <p>\$1,045.71</p>
2.278	<p>Priority creditor's name and mailing address</p> <p>Millecker, Gustave J 4217 N Oakley Ave Chicago, IL 60618</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$191.71</p> <p>\$191.71</p>

Debtor	Name	Case number (if known)	19-23840
2.279	Priority creditor's name and mailing address Miller, Brooke M 5607 Summer Shine Drive #201 Madison, WI 53718	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$849.02 \$849.02
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.280	Priority creditor's name and mailing address Miller, Kenya L 15892 French Crk Fraser, MI 48026	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$42.43 \$42.43
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.281	Priority creditor's name and mailing address Miranda, Bridget K 602 7th St Beaver Falls, PA 15010	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$786.39 \$786.39
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.282	Priority creditor's name and mailing address Money, Sandi R 1014 Forest Oak St Azle, TX 76020	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$158.99 \$158.99
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	Name	Case number (if known)	19-23840
2.283	<p>Priority creditor's name and mailing address</p> <p>Montanez, Jenna M 551 Palo Alto Dr NE Rio Rancho, NM 87124</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$1,146.51 \$1,146.51</p>
2.284	<p>Priority creditor's name and mailing address</p> <p>Montanez, Joey 551 Palo Alto Dr NE Rio Rancho, NM 87124</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$52.23 \$52.23</p>
2.285	<p>Priority creditor's name and mailing address</p> <p>Montoya, Jonathan 10966 E Yucca St Scottsdale, AZ 85259</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$31.24 \$31.24</p>
2.286	<p>Priority creditor's name and mailing address</p> <p>Moon, Zachary E 1808 Abby Creek Dr Little Elm, TX 75068</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$632.19 \$632.19</p>

Debtor	Name	Case number (if known)	19-23840
2.287	<p>Priority creditor's name and mailing address</p> <p>Moorefield, Reginald G 360 Yadkin College Rd Lexington, NC 27295</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>	<p>\$57.66 \$57.66</p>
	<p>Date or dates debt was incurred</p> <p>5/1/19 to 6/1/19</p>	<p>Basis for the claim:</p> <p>Wages</p>	
	<p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	
2.288	<p>Priority creditor's name and mailing address</p> <p>Mora, Richard A 8229 Jarboe St Kansas City, MO 64114</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>	<p>\$556.95 \$556.95</p>
	<p>Date or dates debt was incurred</p> <p>5/1/19 to 6/1/19</p>	<p>Basis for the claim:</p> <p>Wages</p>	
	<p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	
2.289	<p>Priority creditor's name and mailing address</p> <p>Morado, Fermin I 8551 W 91st Pl Westminster, CO 80021</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>	<p>\$269.28 \$269.28</p>
	<p>Date or dates debt was incurred</p> <p>5/1/19 to 6/1/19</p>	<p>Basis for the claim:</p> <p>Wages</p>	
	<p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	
2.290	<p>Priority creditor's name and mailing address</p> <p>Morlang, Scott A 7796 W 152nd Ter Overland Park, KS 66223</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p>	<p>\$264.21 \$264.21</p>
	<p>Date or dates debt was incurred</p> <p>5/1/19 to 6/1/19</p>	<p>Basis for the claim:</p> <p>Wages</p>	
	<p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	

Debtor	Name	Case number (if known)	19-23840
2.291	<p>Priority creditor's name and mailing address</p> <p>Morris, William L 245 N Gorin St Clearwater, KS 67026</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>\$424.53</p> <p>\$424.53</p>
2.292	<p>Priority creditor's name and mailing address</p> <p>Morton, Austin J 790 N Cedar Bluff Rd Apt 714 Knoxville, TN 37923</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>\$25.59</p> <p>\$25.59</p>
2.293	<p>Priority creditor's name and mailing address</p> <p>Mosel, Cheyanne B 4112 Maher Ave Madison, WI 53716</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>\$12.73</p> <p>\$12.73</p>
2.294	<p>Priority creditor's name and mailing address</p> <p>Mosley, Spencer T 124 Sandra St Piedmont, SC 29673</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>\$275.91</p> <p>\$275.91</p>

Debtor	Name	Case number (if known)	19-23840	
2.295	Priority creditor's name and mailing address Mossman, Max 5725 Lakeridge Shawnee, KS 66218	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$142.11	\$142.11
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.296	Priority creditor's name and mailing address Mumpower, Mackensey A 663 O Bryant Rd Reidsville, NC 27320	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$912.67	\$912.67
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.297	Priority creditor's name and mailing address Mundt, Denise L 3021 Selkirk Dr Apt 4 Sun Prairie, WI 53590	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$136.43	\$136.43
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.298	Priority creditor's name and mailing address Munoz, Robert 313 Wauponsee St Apt 3 Morris, IL 60450	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$75.60	\$75.60
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Name	Case number (if known)	19-23840
2.299	<p>Priority creditor's name and mailing address</p> <p>Murphy, Crystal J 905 NW 47th St Oklahoma City, OK 73118</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$730.96</p> <p>\$730.96</p>
2.300	<p>Priority creditor's name and mailing address</p> <p>Murphy, Joshua J 74 Woodgate Ct Manchester, NH 03103</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$437.14</p> <p>\$437.14</p>
2.301	<p>Priority creditor's name and mailing address</p> <p>Muse, Richard V 7619 Buller Rd Pattison, TX 77423</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$660.09</p> <p>\$660.09</p>
2.302	<p>Priority creditor's name and mailing address</p> <p>Nading, Tamisha K 2546 Sonora Dr Grove City, OH 43123</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$366.48</p> <p>\$366.48</p>

Debtor	Name	Case number (if known)	19-23840
2.303	<p>Priority creditor's name and mailing address</p> <p>Navarrete, Kennedy F P O Box 6 Pattison, TX 77466</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$1,000.00</p> <p>\$1,000.00</p>
2.304	<p>Priority creditor's name and mailing address</p> <p>Neil, Nancy 2640 West 15090 South Bluffdale, UT 84065</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$514.29</p> <p>\$514.29</p>
2.305	<p>Priority creditor's name and mailing address</p> <p>Nelson, Ashley M 4624 W Cedar Run Cir Pleasant Grove, UT 84062</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$325.85</p> <p>\$325.85</p>
2.306	<p>Priority creditor's name and mailing address</p> <p>Nicholas, Traci R 3720 W Eddy St Unit 1 Chicago, IL 60618</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$77.14</p> <p>\$77.14</p>

Debtor	Name	Case number (if known)	19-23840	
2.307	Priority creditor's name and mailing address Nicholls, Jeffrey <hr/> Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,330.32	\$12,330.32
2.308	Priority creditor's name and mailing address Nichols, Maury S 6754 E Independence Pl Tulsa, OK 74115 <hr/> Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$141.75	\$141.75
2.309	Priority creditor's name and mailing address Nicholson, Jaime E 503 Tanglebriar Ln Apt A San Antonio, TX 78209 <hr/> Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$79.59	\$79.59
2.310	Priority creditor's name and mailing address Nolan, Danielle 709 Fall Creek Cir Belton, MO 64012 <hr/> Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,552.46	\$1,552.46

Debtor	Name	Case number (if known)	19-23840
2.311	<p>Priority creditor's name and mailing address</p> <p>Norwood, Brent I 4508 Brooklyn Ave Oklahoma City, OK 73160</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>\$54.36</p> <p>\$54.36</p>
2.312	<p>Priority creditor's name and mailing address</p> <p>Nuncio, Robert</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>\$5,159.62</p> <p>\$5,159.62</p>
2.313	<p>Priority creditor's name and mailing address</p> <p>O'Shea, Payj J 3000 Windsong Ln Unit 305 Canonsburg, PA 15317</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>\$1,325.82</p> <p>\$1,325.82</p>
2.314	<p>Priority creditor's name and mailing address</p> <p>Ostlund, Dillon C 2173 W Bird Ct West Jordan, UT 84088</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is:</p> <p><i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>\$63.67</p> <p>\$63.67</p>

Debtor	Name	Case number (if known)	19-23840	
2.315	Priority creditor's name and mailing address Overholt, Kathryn A 1628 Sibley Rd Urbana, OH 43078 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$922.72	\$922.72
2.316	Priority creditor's name and mailing address Pagnucco, Traciann C 5273 Camelot Dr Apt M Fairfield, OH 45014 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,052.28	\$1,052.28
2.317	Priority creditor's name and mailing address Palacio, Tony 2721 S Palm Ct Gilbert, AZ 85295 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,062.15	\$1,062.15
2.318	Priority creditor's name and mailing address Pastrano, Rene J 15 Champions Way San Antonio, TX 78258 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$97.83	\$97.83

Debtor	Name	Case number (if known)	19-23840	
2.319	Priority creditor's name and mailing address Patterson, Erica N 1109 Crest Ave Homewood, AL 35209	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$36.26	\$36.26
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.320	Priority creditor's name and mailing address Patton, Marissa N 2520 S Plaza Dr Apt 1021 Tempe, AZ 85282	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,187.84	\$1,187.84
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.321	Priority creditor's name and mailing address Patzka, Mariann 1401 Okeeffe Ave Apt 101 Sun Prairie, WI 53590	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$111.60	\$111.60
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.322	Priority creditor's name and mailing address Peck, Carissa G 102 Royal Oak Ct Greer, SC 29650	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$50.30	\$50.30
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Name	Case number (if known)	19-23840	
2.323	Priority creditor's name and mailing address Perez, Nicole J 112 Bellerive Ave Bryant, AR 72002	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$1,024.34</u>	<u>\$1,024.34</u>
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.324	Priority creditor's name and mailing address Perry, Alexis D 100 Chinaberry Ln Meridianville, AL 35759	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$1,139.93</u>	<u>\$1,139.93</u>
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.325	Priority creditor's name and mailing address Perry, Keshia D 219 Torpoint Rd Durham, NC 27703	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$169.71</u>	<u>\$169.71</u>
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.326	Priority creditor's name and mailing address Petersen, Dillon G 6968 S Park Reserve Way Midvale, UT 84047	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$1,062.72</u>	<u>\$1,062.72</u>
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Name	Case number (if known)	19-23840	
2.327	Priority creditor's name and mailing address Petersen, Hannah 747 East 550 South Unit 101 American Fork, UT 84003	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,050.53	\$1,050.53
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.328	Priority creditor's name and mailing address Peterson, Ramsey M 11427 Hawk Roost Ct Charlotte, NC 28214	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$219.79	\$219.79
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.329	Priority creditor's name and mailing address Phillips, Ashley 12290 Spruce Dr Mc Calla, AL 35111	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,279.75	\$1,279.75
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.330	Priority creditor's name and mailing address Phillips, Shalynn 114 Cambridge Dr Midwest City, OK 73110	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$965.56	\$965.56
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Name	Case number (if known)	19-23840
2.331	<p>Priority creditor's name and mailing address</p> <p>Pisano, Laura A 36806 Saint Clair Dr New Baltimore, MI 48047</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$88.26 \$88.26</p>
2.332	<p>Priority creditor's name and mailing address</p> <p>Platt, Jeffrey 3951 W Donwald St South Jordan, UT 84009</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$254.57 \$254.57</p>
2.333	<p>Priority creditor's name and mailing address</p> <p>Potts, Daryl 8247 Talbot Cir Mentor, OH 44060</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$363.92 \$363.92</p>
2.334	<p>Priority creditor's name and mailing address</p> <p>Price, Candice M 1518 Branch Rd York, SC 29745</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$1,147.06 \$1,147.06</p>

Debtor	Name	Case number (if known)	19-23840
2.335	Priority creditor's name and mailing address Punches, Jacey 517 Tulip Ln McDonough, GA 30252 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,324.57 \$2,324.57
2.336	Priority creditor's name and mailing address Quintana, Crystal A 6151 Bisbee Pl NW Albuquerque, NM 87114 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,249.38 \$1,249.38
2.337	Priority creditor's name and mailing address Randle, Darren T 14552 South Quiet Shade Dr Herriman, UT 84096 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$400.14 \$400.14
2.338	Priority creditor's name and mailing address Raymond, Madelyn J 29529 N Waukegan Rd Apt 301 Lake Bluff, IL 60044 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$61.51 \$61.51

Debtor	Name	Case number (if known)	19-23840	
2.339	Priority creditor's name and mailing address Redd, Nicholas 12547 S Stonebridge Cir Draper, UT 84020 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$16,813.18	\$13,650.00
2.340	Priority creditor's name and mailing address Reece, Jaclyn M 2025 Violet Ln Virginia Beach, VA 23464 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,107.50	\$1,107.50
2.341	Priority creditor's name and mailing address Reed, Elena N 2050 Keller Springs Rd Apt 311 Carrollton, TX 75006 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$275.35	\$275.35
2.342	Priority creditor's name and mailing address Reese, Deborah 8375 Park Rd Orwell, OH 44076 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$432.51	\$432.51

Debtor	Name	Case number (if known)	19-23840
2.343	<p>Priority creditor's name and mailing address</p> <p>Reynolds, Meghan T 704 Walnut Ln Marengo, IL 60152</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$1,277.63</p> <p>\$1,277.63</p>
2.344	<p>Priority creditor's name and mailing address</p> <p>Rhodes, Jonathan W 8230 Carter Creek Dr Apt 202 Charlotte, NC 28227</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$1,810.74</p> <p>\$1,810.74</p>
2.345	<p>Priority creditor's name and mailing address</p> <p>Rich, Jesse</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$5,192.96</p> <p>\$5,192.96</p>
2.346	<p>Priority creditor's name and mailing address</p> <p>Richard, Melissa 5672 Quinn Ct Westerville, OH 43081</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$290.78</p> <p>\$290.78</p>

Debtor	Name	Case number (if known)	19-23840
2.347	<p>Priority creditor's name and mailing address</p> <p>Ricker, Channing M 2802 Peak Dr McKinney, TX 75071</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$857.44</p> <p>\$857.44</p>
2.348	<p>Priority creditor's name and mailing address</p> <p>Riede, Dorothy L 46 Gem Ct Elizabethtown, KY 42701</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$952.94</p> <p>\$952.94</p>
2.349	<p>Priority creditor's name and mailing address</p> <p>Rios, Nikole Q 354 West 450 North Orem, UT 84057</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$694.89</p> <p>\$694.89</p>
2.350	<p>Priority creditor's name and mailing address</p> <p>Roberts, Brendan L 629 Logsdon Ct Louisville, KY 40243</p> <p>Date or dates debt was incurred 5/1/19 to 6/1/19</p> <p>Last 4 digits of account number</p> <p>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Wages</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$93.21</p> <p>\$93.21</p>

Debtor	Name	Case number (if known)	19-23840
2.351	Priority creditor's name and mailing address Robledo, Stephen J 51 Rolling Rd Cranberry Twp, PA 16066 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,341.85 \$1,341.85
2.352	Priority creditor's name and mailing address Roby Ingram, Shelley A 1408 Whilden Pl Greensboro, NC 27408 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,688.05 \$1,688.05
2.353	Priority creditor's name and mailing address Rodriguez, Javier 4901 W 93rd Ave Apt 2018 Westminster, CO 80031 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$320.07 \$320.07
2.354	Priority creditor's name and mailing address Rodriguez, Marisa E 414 W Wright Blvd Universal City, TX 78148 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$580.96 \$580.96

Debtor	Name	Case number (if known)	19-23840	
2.355	Priority creditor's name and mailing address Rollison, Hannah B 140 Pontious Ln Circleville, OH 43113 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$87.03	\$87.03
2.356	Priority creditor's name and mailing address Rossoll, Laura 2605 Shining Water Dr Apt 101 Louisville, KY 40299 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$156.91	\$156.91
2.357	Priority creditor's name and mailing address Ruffin, Shana A 222 Scottish Ave Simpsonville, SC 29680 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,305.19	\$1,305.19
2.358	Priority creditor's name and mailing address Russell, Logan I 7857 Boulder Ct West Des Moines, IA 50266 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$546.56	\$546.56

Debtor	Name	Case number (if known)	19-23840	
2.359	Priority creditor's name and mailing address Russon, Steven P 732 West 600 North Orem, UT 84057	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,346.20	\$1,346.20
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.360	Priority creditor's name and mailing address Ryan, Shelby A 4820 NE Megan Lane Ankeny, IA 50021	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$45.21	\$45.21
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.361	Priority creditor's name and mailing address Sachs, Angela M 5557 West 4390 South West Valley City, UT 84120	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,348.52	\$1,348.52
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.362	Priority creditor's name and mailing address Sage, Daniel C 444 State Park Rd Ortonville, MI 48462	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$263.71	\$263.71
	Date or dates debt was incurred 5/1/19 to 6/1/92	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Name	Case number (if known)	19-23840	
2.363	Priority creditor's name and mailing address Sailor, Shelby J 500 W 140th Pl Apt 2108 Overland Park, KS 66223	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$148.68	\$148.68
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.364	Priority creditor's name and mailing address Saley, Sari J 4787 E Clayton Rd Fitchburg, WI 53711	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,047.33	\$1,047.33
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.365	Priority creditor's name and mailing address Sanders, Averi O 1320 N 109th Plz Apt 322 Omaha, NE 68154	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,081.34	\$1,081.34
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.366	Priority creditor's name and mailing address Schultz, Angela C 464 Canyon Rd Logan, UT 84321	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,269.09	\$1,269.09
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Name	Case number (if known)	19-23840	
2.367	Priority creditor's name and mailing address Schultz, Gregory 3409 Chaffin Dr Richland Hills, TX 76118	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$534.42	\$534.42
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.368	Priority creditor's name and mailing address Schwieterman, Rachel J 1636 Warren Rd Unit 2 Lakewood, OH 44107	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$3,781.68	\$3,781.68
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.369	Priority creditor's name and mailing address Scott, Ashley D 7208 Park West Circle Apt 310 Fort Worth, TX 76134	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$104.53	\$104.53
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.370	Priority creditor's name and mailing address Scott, Lindsay 97 N Andrews St Lake Orion, MI 48362	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,206.13	\$1,206.13
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Name	Case number (if known)	19-23840	
2.371	Priority creditor's name and mailing address Seiber, Katherine A 425 East 100 South Orem, UT 84097	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,484.12	\$1,484.12
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.372	Priority creditor's name and mailing address Sellinger, Jennifer L 1523 W Windsong Dr Phoenix, AZ 85045	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$885.03	\$885.03
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.373	Priority creditor's name and mailing address Sellinger, John 1523 W Windsong Dr Phoenix, AZ 85045	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$9,119.34	\$9,119.34
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.374	Priority creditor's name and mailing address Shaw, Marquita D 5745 Sycamore Woods Dr Memphis, TN 38134	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$203.60	\$203.60
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Name	Case number (if known)	19-23840	
2.375	Priority creditor's name and mailing address Shepherd, Justin C 5 Mallard Ct Litchfield, NH 03052	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$110.39	\$110.39
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.376	Priority creditor's name and mailing address Simmons, Tyler S 6130 Alma Rd Apt 6224 McKinney, TX 75070	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$155.64	\$155.64
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.377	Priority creditor's name and mailing address Sloan, Samantha M 5202 NW 62nd Ave Johnston, IA 50131	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,244.34	\$2,244.34
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.378	Priority creditor's name and mailing address Sloan, Tayvia L 2920 Shadowbriar Dr Houston, TX 77082	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$995.81	\$995.81
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Name	Case number (if known)	19-23840	
2.379	Priority creditor's name and mailing address Smith, Cristin K 22511 Round Valley Dr Katy, TX 77450 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$271.47	\$271.47
2.380	Priority creditor's name and mailing address Smith, Michael A 155 S Otterbein Ave Westerville, OH 43081 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$18.64	\$18.64
2.381	Priority creditor's name and mailing address Smith, Patrick A 355 N Rock Island St Apt 302 Wichita, KS 67202 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6.26	\$6.26
2.382	Priority creditor's name and mailing address Smithpeter, Danielle R 2890 Brighton Blvd Denver, CO 80216 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,299.98	\$1,299.98

Debtor	Name	Case number (if known)	19-23840	
2.383	Priority creditor's name and mailing address Smotzer, Sara A 164 Boulder Hill Pass Montgomery, IL 60538	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,743.47	\$2,743.47
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.384	Priority creditor's name and mailing address Sorenseon, Erin 15215 South Mountainside Dr Bluffdale, UT 84065	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$378.41	\$378.41
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.385	Priority creditor's name and mailing address Spencer, Robert 11323 Arcade Dr #103 Little Rock, AR 72212	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$466.23	\$466.23
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.386	Priority creditor's name and mailing address Statz, Jeffrey 7551 Hubbard Ave Apt 510 Middleton, WI 53562	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$132.62	\$132.62
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Name	Case number (if known)	19-23840	
2.387	Priority creditor's name and mailing address Steele, Jacob R 1205 County Road 4642 Trenton, TX 75490	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$61.33	\$61.33
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.388	Priority creditor's name and mailing address Stevens, Lorenzo R 10024 Floyd Ave SW Albuquerque, NM 87121	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$389.61	\$389.61
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.389	Priority creditor's name and mailing address Stewart, Amanda L 875 Peach Blvd Willoughby, OH 44094	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$24.64	\$24.64
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.390	Priority creditor's name and mailing address Stewart, Chanel 1888 South 300 East Salt Lake City, UT 84115	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$111.86	\$111.86
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Name	Case number (if known)	19-23840	
2.391	Priority creditor's name and mailing address Stewart, Tiffany 230 E Howell St Apt 3107 McKinney, TX 75069	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,194.26	\$1,194.26
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.392	Priority creditor's name and mailing address Stoffel, Alyssa G 2309 Gale St Mount Pleasant, TX 75455	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$968.95	\$968.95
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.393	Priority creditor's name and mailing address Strong Enlow, Shannon 216 Tanglewood Dr Gurnee, IL 60031	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$12.86	\$12.86
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.394	Priority creditor's name and mailing address Stump, Nicole M 10100 Rock Hollow Rd Apt 301 Raleigh, NC 27617	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$261.46	\$261.46
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Name	Case number (if known)	19-23840	
2.395	Priority creditor's name and mailing address Stungis, Justin R 5152 S 99th Ct Apt 11 Omaha, NE 68127	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$181.02	\$181.02
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.396	Priority creditor's name and mailing address Sturgis, Spencer S 2972 Davison Ave Auburn Hills, MI 48326	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,445.71	\$1,445.71
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.397	Priority creditor's name and mailing address Taylor, Avery J 63 E Center St Apt 302 Provo, UT 84606	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$306.36	\$306.36
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.398	Priority creditor's name and mailing address Taylor, Jill D 705 Sawyer Dr Saginaw, TX 76179	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$270.32	\$270.32
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Name	Case number (if known)	19-23840	
2.399	Priority creditor's name and mailing address Thao, Ly 513 E Quinton St Broken Arrow, OK 74011 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$905.31</u>	<u>\$905.31</u>
2.400	Priority creditor's name and mailing address Thomas, Caylen A 11800 Kimberlyn Rd Oklahoma City, OK 73162 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$359.99</u>	<u>\$359.99</u>
2.401	Priority creditor's name and mailing address Thomas, Sasha N 4701 Legacy Dr Plano, TX 75024 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,007.81</u>	<u>\$1,007.81</u>
2.402	Priority creditor's name and mailing address Thomas, William A 3134 Adell Way Durham, NC 27703 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$51.76</u>	<u>\$51.76</u>

Debtor	Name	Case number (if known)	19-23840	
2.403	Priority creditor's name and mailing address Thompson, Aaliyah Z 1600 Ross Hill Rd Beaver Falls, PA 15010	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$88.71	\$88.71
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.404	Priority creditor's name and mailing address Thompson, Becky 656 County Road 4518 Wolfe City, TX 75496	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$69.54	\$69.54
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.405	Priority creditor's name and mailing address Toler, Raef T 1250 Hobson St Longwood, FL 32750	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$236.59	\$236.59
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.406	Priority creditor's name and mailing address Tollison, Garielle M 6859 Andrews Rd Memphis, TN 38135	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,050.52	\$1,050.52
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Name	Case number (if known)	19-23840	
2.407	Priority creditor's name and mailing address Tooley, Celeste 11042 North 5500 West Highland, UT 84003	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$881.73	\$881.73
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.408	Priority creditor's name and mailing address Towler, Rebecca A P O Box 1264 Mannford, OK 74044	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,998.80	\$1,998.80
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.409	Priority creditor's name and mailing address Traynor, Jillian F 2942 Voelkel Ave Apt 2 Pittsburgh, PA 15216	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,085.61	\$1,085.61
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.410	Priority creditor's name and mailing address Trejo-Tate, Nathaniel J 10824 E Arcadia Ave Mesa, AZ 85208	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$412.06	\$412.06
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Name	Case number (if known)	19-23840	
2.411	Priority creditor's name and mailing address Trieu, Miranda 4724 Emerald Trace Way Keller, TX 76244	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$2,079.75</u>	<u>\$2,079.75</u>
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.412	Priority creditor's name and mailing address Uptain, Chelsea L 4802 Redfish Reef Dr Bacliff, TX 77518	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$1,334.92</u>	<u>\$1,334.92</u>
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.413	Priority creditor's name and mailing address Utah State Tax Commission Attn: Michelle Riggs 210 North 1950 West Salt Lake City, UT 84134	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>Unknown</u>	<u>\$0.00</u>
	Date or dates debt was incurred	Basis for the claim: Taxes		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.414	Priority creditor's name and mailing address Valdizan, Iris A 954 East 100 North Lindon, UT 84042	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$182.70</u>	<u>\$182.70</u>
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Name	Case number (if known)	19-23840	
2.415	Priority creditor's name and mailing address Vigil, Jesus J 731 Gilpin St Houston, TX 77034	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$900.84</u>	<u>\$900.84</u>
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.416	Priority creditor's name and mailing address Villa, Eric J 1112 Casa Roja Pl NW Albuquerque, NM 87120	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$389.38</u>	<u>\$389.38</u>
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.417	Priority creditor's name and mailing address Villarreal, Daniel 2803 Marshall St Pasadena, TX 77506	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$418.55</u>	<u>\$418.55</u>
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.418	Priority creditor's name and mailing address Wakefield, Sarah F 1145 Canyon Meadow Dr Apt 7 Provo, UT 84606	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$1,038.08</u>	<u>\$1,038.08</u>
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Name	Case number (if known)	19-23840	
2.419	Priority creditor's name and mailing address Wallace, LaTasha A 10626 Ellison Plz Apt 10 Omaha, NE 68134 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,501.80	\$1,501.80
2.420	Priority creditor's name and mailing address Ward, Jacqueline Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$336.09	\$336.09
2.421	Priority creditor's name and mailing address Ware, Canei M 2203 Stardust Dr Tuscaloosa, AL 35405 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,033.75	\$1,033.75
2.422	Priority creditor's name and mailing address Washington, Brittany B 100 Minton St Joliet, IL 60436 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,378.29	\$1,378.29

Debtor	Name	Case number (if known)	19-23840	
2.423	Priority creditor's name and mailing address Washington, Ikey L 10116 Avenue I Baton Rouge, LA 70807	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$525.69</u>	<u>\$525.69</u>
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.424	Priority creditor's name and mailing address Watkins, Brianna N 3277 Tuxedo St Detroit, MI 48206	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$501.27</u>	<u>\$501.27</u>
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.425	Priority creditor's name and mailing address Weide, Neil E 17023 Poppleton Ave Omaha, NE 68130	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$246.61</u>	<u>\$246.61</u>
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.426	Priority creditor's name and mailing address Weifenbaugh, Alyson K 605 Regency Dr Pittsburgh, PA 15239	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$1,216.14</u>	<u>\$1,216.14</u>
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Name	Case number (if known)	19-23840	
2.427	Priority creditor's name and mailing address Weigle, Zachary J 202 River Oaks Dr Lake Jackson, TX 77566	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$141.29	\$141.29
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.428	Priority creditor's name and mailing address Weir, Angela M 614 Westbury Way Simpsonville, SC 29680	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,328.98	\$1,328.98
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.429	Priority creditor's name and mailing address Welch, Coy D 4813 Wolf Ln Yukon, OK 73099	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$378.25	\$378.25
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.430	Priority creditor's name and mailing address Wells, Dawn D 22410 Crisfield Ct Katy, TX 77450	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$178.47	\$178.47
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Name	Case number (if known)	19-23840	
2.431	Priority creditor's name and mailing address West, Crystal L 328 College St Groveport, OH 43125	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$931.18</u>	<u>\$931.18</u>
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.432	Priority creditor's name and mailing address White, Courtney 4334 Clovelly Dr Greensboro, NC 27406	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$67.33</u>	<u>\$67.33</u>
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.433	Priority creditor's name and mailing address Williams, Calunetta 2257 Silverleaf Dr Apt 3 Bartlett, TN 38134	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$1,308.84</u>	<u>\$1,308.84</u>
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.434	Priority creditor's name and mailing address Williams, Cynthia A 18 Rocky Ledge Rd Merrimack, NH 03054	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$70.12</u>	<u>\$70.12</u>
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Name	Case number (if known)	19-23840	
2.435	Priority creditor's name and mailing address Williams, Glenn T 16411 Whistling Pines Rd Umatilla, FL 32784 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$298.88	\$298.88
2.436	Priority creditor's name and mailing address Williams, Jalisia A 5510 Tomahawk Dr Apt H Greensboro, NC 27410 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,081.28	\$1,081.28
2.437	Priority creditor's name and mailing address Williams, Jamael D 40062 Cambridge St Apt 102 Canton, MI 48187 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$170.56	\$170.56
2.438	Priority creditor's name and mailing address Williams, Kevin Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,713.35	\$2,713.35

Debtor	Name	Case number (if known)	19-23840	
2.439	Priority creditor's name and mailing address Winkle, Christopher A	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$4,155.64</u>	<u>\$4,155.64</u>
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.440	Priority creditor's name and mailing address Wolfe, Genevieve R 5295 Riverchase Dr Apt 806 Phenix City, AL 36867	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$1,257.56</u>	<u>\$1,257.56</u>
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.441	Priority creditor's name and mailing address Wood, Garret C 102 Edenberry Ct Easley, SC 29642	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$159.17</u>	<u>\$159.17</u>
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.442	Priority creditor's name and mailing address Woodland, Kowaisha D 762 Grovewood Dr Cordova, TN 38018	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$206.20</u>	<u>\$206.20</u>
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Name	Case number (if known)	19-23840	
2.443	Priority creditor's name and mailing address Wright, Kathryn M 979 Robertson St Columbus, OH 43201	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$76.50	\$76.50
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.444	Priority creditor's name and mailing address Wyatt, Detra 6008 N 37th St Omaha, NE 68111	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,489.00	\$1,489.00
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.445	Priority creditor's name and mailing address Wynn, Eric 360 S State St Unit C330 Orem, UT 84058	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$5,807.22	\$5,807.22
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.446	Priority creditor's name and mailing address Young, Rachel C 602 N Westridge Dr Wichita, KS 67203	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,672.66	\$1,672.66
	Date or dates debt was incurred 5/1/19 to 6/1/19	Basis for the claim: Wages		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Name	Case number (if known)	19-23840	
2.447	Priority creditor's name and mailing address Zarefoss, Martin 576 SW Maynard Rd Cary, NC 27511 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$588.16	\$588.16
2.448	Priority creditor's name and mailing address Zumbrum, Crystal 8126 Dumphries Dr Huntersville, NC 28078 Date or dates debt was incurred 5/1/19 to 6/1/19 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Wages Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,700.25	\$4,700.25

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim	
3.1	Nonpriority creditor's name and mailing address 10825 Washington Blvd, LLC Attn: Shirley Burke 10825 Washington Blvd. Culver City, CA 90232 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.2	Nonpriority creditor's name and mailing address 111 Pine Street, LLC Attn: Holly Madulka 869 Union Street Manchester, NH 03104 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.3	Nonpriority creditor's name and mailing address 2016 Seshiki Family Trust Attn: Alan Seshiki 480 Gallian Way Seal Beach, CA 90740 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation Name	Case number (if known)	19-23840
--------	--------------------------	------------------------	----------

3.4	Nonpriority creditor's name and mailing address 35 Market Street, L.P. Attn: Charles Bonin 133 Washington Street Morristown, NJ 07960 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.5	Nonpriority creditor's name and mailing address A&T Investments and Holdings, Inc. Vankat Tangirala 1388 Loyola Dr. Santa Clara, CA 95501 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.6	Nonpriority creditor's name and mailing address Aaron Hoke Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$100,806.45
<hr/>			
3.7	Nonpriority creditor's name and mailing address ABM Building Value P O Box 419860 Boston, MA 02241 Date(s) debt was incurred _____ Last 4 digits of account number <u>2728</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Janitorial Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,786.76
<hr/>			
3.8	Nonpriority creditor's name and mailing address Advantage Telecom P O Box 5454 Ventura, CA 93005 Date(s) debt was incurred _____ Last 4 digits of account number <u>2794</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Phone/Internet/TV</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,289.15
<hr/>			
3.9	Nonpriority creditor's name and mailing address AEP Ohio P O Box 371496 Pittsburgh, PA 15250 Date(s) debt was incurred _____ Last 4 digits of account number <u>0218</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$807.45
<hr/>			
3.10	Nonpriority creditor's name and mailing address AEP Public Service Company of Oklahoma P O Box 24401 Canton, OH 44701 Date(s) debt was incurred _____ Last 4 digits of account number <u>0219</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$639.33

Debtor	Noah Corporation <small>Name</small>	Case number (if known)	19-23840
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3.11	Nonpriority creditor's name and mailing address Aero Mechanical Incorporated 4445 Corporation Lane Virginia Beach, VA 23462 Date(s) debt was incurred ____ Last 4 digits of account number <u>5570</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$270.00
<hr/>			
3.12	Nonpriority creditor's name and mailing address Alabama Alarm Company, Inc. P O Box 190346 Birmingham, AL 35219 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,859.49
<hr/>			
3.13	Nonpriority creditor's name and mailing address Alabama Power P O Box 242 Birmingham, AL 35201 Date(s) debt was incurred ____ Last 4 digits of account number <u>4249</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,707.97
<hr/>			
3.14	Nonpriority creditor's name and mailing address Albert & Sharon Cardosa 1804 Blue Jay Drive Roseville, CA 95661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.15	Nonpriority creditor's name and mailing address Albert E. Engel III Trust 11208 Lane Park Road Tavares, FL 32778 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.16	Nonpriority creditor's name and mailing address Albuquerque Bernalillo County Water P O Box 27226 Albuquerque, NM 87125 Date(s) debt was incurred ____ Last 4 digits of account number <u>5430</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,109.57
<hr/>			
3.17	Nonpriority creditor's name and mailing address Alfred Muffoletto, Jr. 418 Ave U, Apt #2 Brooklyn, NY 11223 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation Name	Case number (if known)	19-23840
--------	--------------------------	------------------------	----------

3.18	Nonpriority creditor's name and mailing address Alice Fay Jones 10733 Spyglass Cedar Hills, UT 84062 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$208,330.80
3.19	Nonpriority creditor's name and mailing address All for Him Investments, LLC Attn: Alan Mauldin 9209 Grandview Dr Denton, TX 76207-6627 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.20	Nonpriority creditor's name and mailing address Allen G. Gilmour 2463 NW Shields Drive Bend, OR 97703 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.21	Nonpriority creditor's name and mailing address Alliant Energy P O Box 3062 Cedar Rapids, IA 52406 Date(s) debt was incurred ____ Last 4 digits of account number <u>1983</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$575.05
3.22	Nonpriority creditor's name and mailing address Alliant Integrators, Inc. 2700 Diode Lane Louisville, KY 40299 Date(s) debt was incurred ____ Last 4 digits of account number <u>3008</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$380.00
3.23	Nonpriority creditor's name and mailing address Alma Jeppson 10934 Fern Ridge Dr. South Jordan, UT 84009 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$727,600.00
3.24	Nonpriority creditor's name and mailing address Aly & Keith Pennington 770 East Main Street, #118 Lehi, UT 84043 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation Name	Case number (if known)	19-23840
--------	--------------------------	------------------------	----------

3.25	Nonpriority creditor's name and mailing address Ambleside Park, Inc. Attn: Michael Roberts P O Box 93 Nottingham, NH 03290 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.26	Nonpriority creditor's name and mailing address American Center Owners Association, Inc. 757 N. Broadway, Suite 700 Milwaukee, WI 53202 Date(s) debt was incurred _____ Last 4 digits of account number <u>1090</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>HOA</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$990.29
3.27	Nonpriority creditor's name and mailing address AmFil Realty, LLC 55 Clifffield Rd Bedford, NY 10506 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.28	Nonpriority creditor's name and mailing address AMLDCO, Inc. P O Box 691413 Charlotte, NC 28227 Date(s) debt was incurred _____ Last 4 digits of account number <u>9129</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$390.00
3.29	Nonpriority creditor's name and mailing address Andrew B. Walsh Sandra L. Walsh 1298 Kings Bottom Dr. Fort Mill, SC 29715 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.30	Nonpriority creditor's name and mailing address Andrew Moyce 1163 Ashmount Avenue Piedmont, CA 94610 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$408,000.00
3.31	Nonpriority creditor's name and mailing address Anitha Kancharla Ravinder Regatte 7 Tryall Blvd. Monroe Township, NJ 08831 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation <small>Name</small>	Case number (if known)	19-23840
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3.32	Nonpriority creditor's name and mailing address Anne B. Flair Revocable Trust 9 Slippery Rock Road North Hampton, NH 03862 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.33	Nonpriority creditor's name and mailing address Anne Davidson Kern 2804 Chimney Hill Rd. Edmond, OK 73034 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.34	Nonpriority creditor's name and mailing address Anne Sedler Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$67,320.00
3.35	Nonpriority creditor's name and mailing address Ansara Nominee California Trust Attn: Marg Ansara 29 Parsons Drive Swampscott, MA 01907 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.36	Nonpriority creditor's name and mailing address Anson V. Smith Genevieve C. Smith 96 Kinsman Road Grafton, NH 03240 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.37	Nonpriority creditor's name and mailing address Anthony Perricone 5625 Shasta Daisy Trail San Diego, CA 92130 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$153,000.00
3.38	Nonpriority creditor's name and mailing address Antonia C. Garrison-Boufford 7451 Bond St. Saint Leonard, MD 20685 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Name	Case number (if known)	19-23840
3.39	Nonpriority creditor's name and mailing address Appalachian Supply, Inc. Attn: Dekoeyer, Mike 4581 Memorial Drive Saint Johnsbury, VT 05819 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.40	Nonpriority creditor's name and mailing address Aqua Ohio P O Box 70279 Philadelphia, PA 19176 Date(s) debt was incurred _____ Last 4 digits of account number <u>5226</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.41	Nonpriority creditor's name and mailing address Aqua Ohio P O Box 70279 Philadelphia, PA 19176 Date(s) debt was incurred _____ Last 4 digits of account number <u>5248</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.42	Nonpriority creditor's name and mailing address Aqua Ohio P O Box 70279 Philadelphia, PA 19176 Date(s) debt was incurred _____ Last 4 digits of account number <u>5246</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.43	Nonpriority creditor's name and mailing address Aqua Ohio P O Box 70279 Philadelphia, PA 19176 Date(s) debt was incurred _____ Last 4 digits of account number <u>5225</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.44	Nonpriority creditor's name and mailing address Aras Capital Co. Attn: Pat Mazhari 103 Avalon Court Canton, GA 30115 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.45	Nonpriority creditor's name and mailing address ARKY Consulting, LLC Attn: Carmen Restivo 24-40 160 St. Whitestone, NY 11357 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation <small>Name</small>	Case number (if known)	19-23840
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3.46	Nonpriority creditor's name and mailing address Arlo S. Webb Ingrid A. Webb 826 N 1700 W Lehi, UT 84043 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.47	Nonpriority creditor's name and mailing address Arthur Hunt Laurie Boswell P O Box 682 Franconia, NH 03580 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.48	Nonpriority creditor's name and mailing address AS 2012 401k Trust Attn: Ali Sagheb P O Box 24373 Los Angeles, CA 90034 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.49	Nonpriority creditor's name and mailing address Asay Holdings LLC Bill & Mary Cae 147 Braim Road Greenfield Center, NY 12833 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.50	Nonpriority creditor's name and mailing address At the Lake Investments, LLC 118 Lakeshore Dr. Holderness, NH 03245 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.51	Nonpriority creditor's name and mailing address AT&T P O Box 5014 Carol Stream, IL 60197 Date(s) debt was incurred ____ Last 4 digits of account number <u>0117</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Internet/Phone</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.52	Nonpriority creditor's name and mailing address Attilio Valente and Terri Valente 1440 W. Alder Road Taylorsville, UT 84123 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Noah Corporation Name	Case number (if known)	19-23840
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3.53	Nonpriority creditor's name and mailing address Aurelia Maribel Dalusung 24139 Ravenna Ave. Carson, CA 90745 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.54	Nonpriority creditor's name and mailing address Automated Mechanical 1574 West 2650 South Ogden, UT 84401 Date(s) debt was incurred ____ Last 4 digits of account number <u>0003</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,500.00
3.55	Nonpriority creditor's name and mailing address Automated Mechanical 1574 West 2650 South Ogden, UT 84401 Date(s) debt was incurred ____ Last 4 digits of account number <u>0002</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$509.75
3.56	Nonpriority creditor's name and mailing address Avant8 1816 South State Street Salt Lake City, UT 84115 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$190,332.06
3.57	Nonpriority creditor's name and mailing address BA Land Professionals 8534 Yankee Street Dayton, OH 45458 Date(s) debt was incurred ____ Last 4 digits of account number <u>1068</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,547.00
3.58	Nonpriority creditor's name and mailing address Barron, Dana 2633 Lincoln Blvd #215 Santa Monica, CA 90405 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.59	Nonpriority creditor's name and mailing address Barry L. Dickey & Shirley E. Dickey 2257 Raleigh Dr. Lancaster, PA 17601 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation Name	Case number (if known)	19-23840
--------	--------------------------	------------------------	----------

3.60	Nonpriority creditor's name and mailing address BC Ten Air 3861 Childs Lake Road Milford, MI 48381 Date(s) debt was incurred ____ Last 4 digits of account number <u>V519</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$520.00
3.61	Nonpriority creditor's name and mailing address Benjamin Thomas 8494 South 700 East Sandy, UT 84070 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$102,000.00
3.62	Nonpriority creditor's name and mailing address Berg Chicago 435 Aptakistic Road Lincolnshire, IL 60069 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,414.00
3.63	Nonpriority creditor's name and mailing address Big Red Fire Protection 2344 S 156th Circle Omaha, NE 68130 Date(s) debt was incurred ____ Last 4 digits of account number <u>2946</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$150.00
3.64	Nonpriority creditor's name and mailing address Birmingham Water Works P O Box 830269 Birmingham, AL 35283 Date(s) debt was incurred ____ Last 4 digits of account number <u>7340</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$200.02
3.65	Nonpriority creditor's name and mailing address Birmingham Water Works P O Box 830269 Birmingham, AL 35283 Date(s) debt was incurred ____ Last 4 digits of account number <u>7339</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$52.35
3.66	Nonpriority creditor's name and mailing address Birmingham Water Works P O Box 830269 Birmingham, AL 35283 Date(s) debt was incurred ____ Last 4 digits of account number <u>7346</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$28.02

Debtor	Noah Corporation <small>Name</small>	Case number (if known)	19-23840
--------	---	------------------------	----------

3.67	Nonpriority creditor's name and mailing address Birrell Services 14663 South 800 West Bluffdale, UT 84065 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,620.00
<hr/>			
3.68	Nonpriority creditor's name and mailing address Blohan, LLC Jacalynn H. Blouin, Manager P O Box 94 Saint Albans, VT 05478 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.69	Nonpriority creditor's name and mailing address Blush Property, LLC Attn: Linda Camp P O Box 1168 Mount Dora, FL 32756 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.70	Nonpriority creditor's name and mailing address Boli Family Trust 18 Oro Valley Drive Henderson, NV 89052 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.71	Nonpriority creditor's name and mailing address BP412, LLC 2991 Creekwood Estates Drive Blacklick, OH 43004 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.72	Nonpriority creditor's name and mailing address Brad Holmes 174 Starks Lane Wallsburg, UT 84082 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$102,833.32
<hr/>			
3.73	Nonpriority creditor's name and mailing address Brandon Gibson Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$56,020.89

Debtor	Noah Corporation <small>Name</small>	Case number (if known)	19-23840
--------	---	------------------------	----------

3.74	Nonpriority creditor's name and mailing address Brandon Jensen 602 East 5640 South Murray, UT 84107 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$112,000.00
3.75	Nonpriority creditor's name and mailing address Brett Bailey 9908 N Oxford Ct Highland, UT 84003 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$52,833.36
3.76	Nonpriority creditor's name and mailing address Brian/Jody Horrocks/Dorius 100 N Eaglewood Dr North Salt Lake, UT 84054 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$51,062.51
3.77	Nonpriority creditor's name and mailing address Bromberg Trust 4136 Picasso Ave Woodland Hills, CA 91364 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.78	Nonpriority creditor's name and mailing address Brookfield Corporate Center Property Owner Association, Inc. c/o AMS P O Box 38809 Charlotte, NC 28278 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>HOA</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$39.38
3.79	Nonpriority creditor's name and mailing address Bruce I. Rose Maureen A. Rose 900 Drum Ave. New Smyrna Beach, FL 32169 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.80	Nonpriority creditor's name and mailing address Bruce Rose, Trustee of the Rose Family Trust dated December 3, 2018 900 Drive Avenue New Smyrna Beach, FL 32169 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation Name	Case number (if known)	19-23840
--------	--------------------------	------------------------	----------

3.81	Nonpriority creditor's name and mailing address Bruce Russell 169 Hindley Ave. Manatoba, R2M1P9 CANADA Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.82	Nonpriority creditor's name and mailing address Bryan Jennings 252 South 25 West Farmington, UT 84025 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$102,833.32
<hr/>			
3.83	Nonpriority creditor's name and mailing address Bryant Stirling 468 West 1800 North Pleasant Grove, UT 84062 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$41,133.32
<hr/>			
3.84	Nonpriority creditor's name and mailing address BTJD Corporate Services, LLC 3165 East Millrock Drive, Suite 500 Salt Lake City, UT 84121 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.85	Nonpriority creditor's name and mailing address Building Platforms Unlimited, LLC Att: Drapkin 31700 Seaview Road Cazadero, CA 95421 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.86	Nonpriority creditor's name and mailing address Burke, Danny & Louise P O Box 816 Lincoln, NH 03251 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.87	Nonpriority creditor's name and mailing address Burris Revocable Living Trust Burris, Peter and Denise 12403 Aarow Head Rd. Pine Grove, CA 95665 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation Name	Case number (if known)	19-23840
--------	--------------------------	------------------------	----------

3.88	Nonpriority creditor's name and mailing address C. Mark Phillips M. Robin Phillips 15501 6100 Rd. Montrose, CO 81403 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.89	Nonpriority creditor's name and mailing address Calva An Ledbetter 4764 Mt. Royal Ave. San Diego, CA 92117 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.90	Nonpriority creditor's name and mailing address CAMAC, Inc. Attn: James Calinger 823 SW 10th Avenue Topeka, KS 66612 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.91	Nonpriority creditor's name and mailing address Carl A. Lillmars Jr. Donna M. Lillmars 1185 Juanita Circle Venice, FL 34285 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.92	Nonpriority creditor's name and mailing address Carriage House Associates of Rye Attn: MacKey 24 Alehson Street Rye, NH 03870 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.93	Nonpriority creditor's name and mailing address Carroll County Leasing Company Tom & Makena Herget 17 Cotton Farm Lane North Hampton, NH 03862 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.94	Nonpriority creditor's name and mailing address Cary Holmes 890 South Hicken Lane Heber City, UT 84032 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$157,508.32

Debtor	Noah Corporation <small>Name</small>	Case number (if known)	19-23840
--------	---	------------------------	----------

3.95	Nonpriority creditor's name and mailing address CAS Investment Company, L.C. Attn: Stan Spurrier 4912 Wallace Lane Salt Lake City, UT 84117 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.96	Nonpriority creditor's name and mailing address Casciari Revocable Living Trust Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.97	Nonpriority creditor's name and mailing address Cecil Township Municipal Authority 375 Southpointe Blvd., Suite 350 Canonsburg, PA 15317 Date(s) debt was incurred _____ Last 4 digits of account number <u>2074</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.98	Nonpriority creditor's name and mailing address Center Point Energy P O Box 4583 Houston, TX 77210 Date(s) debt was incurred _____ Last 4 digits of account number <u>6727</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.99	Nonpriority creditor's name and mailing address Center Point Energy P O Box 4583 Houston, TX 77210 Date(s) debt was incurred _____ Last 4 digits of account number <u>8835</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$173.91
3.100	Nonpriority creditor's name and mailing address Central Arkansas Water Utility Billing Services P O Box 8100 Little Rock, AR 72203 Date(s) debt was incurred _____ Last 4 digits of account number <u>8301</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$183.41
3.101	Nonpriority creditor's name and mailing address Centurylink P O Box 52187 Phoenix, AZ 85072 Date(s) debt was incurred _____ Last 4 digits of account number <u>3230</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Internet</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$426.54

Debtor	Noah Corporation <small>Name</small>	Case number (if known)	19-23840
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3.102	Nonpriority creditor's name and mailing address Centurylink P O Box 52187 Phoenix, AZ 85072 Date(s) debt was incurred ____ Last 4 digits of account number <u>0683</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Phone/Internet</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$787.48
<hr/>			
3.103	Nonpriority creditor's name and mailing address Centurylink P O Box 91155 Seattle, WA 98111 Date(s) debt was incurred ____ Last 4 digits of account number <u>698B</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.104	Nonpriority creditor's name and mailing address Chandler Airport Center P O Box 105260 Atlanta, GA 30348 Date(s) debt was incurred ____ Last 4 digits of account number <u>3A02</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>HOA</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$732.91
<hr/>			
3.105	Nonpriority creditor's name and mailing address Charles Asher 273 Spencer Street Folsom, CA 95630 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.106	Nonpriority creditor's name and mailing address Charles H. Gilliam Tonya L. Gilliam 4621 94th Street Lubbock, TX 79424 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.107	Nonpriority creditor's name and mailing address Charlie Jae Lee c/o Michael Lessack 1553 Lemoine Avenue Fort Lee, NJ 07024 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.108	Nonpriority creditor's name and mailing address Cheryl Wilde 233 West 800 North American Fork, UT 84003 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation <small>Name</small>	Case number (if known)	19-23840
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3.109	Nonpriority creditor's name and mailing address Chris Hoke 1709 Shady Knoll Court Sewickley, PA 15143 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$404,000.00
3.110	Nonpriority creditor's name and mailing address Chris Jensen Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$74,000.00
3.111	Nonpriority creditor's name and mailing address Chris Savard Reyan Bensason 459 N Clarkson St. Denver, CO 80218 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.112	Nonpriority creditor's name and mailing address Christopher C. Fucci 230 West Street Rutland, VT 05701 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.113	Nonpriority creditor's name and mailing address Christopher M. Marseilles 51 Railroad Street Unit 430 Keene, NH 03431 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.114	Nonpriority creditor's name and mailing address City of Blue Ash 4343 Cooper Road Blue Ash, OH 45242 Date(s) debt was incurred ____ Last 4 digits of account number <u>7241</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$759.67
3.115	Nonpriority creditor's name and mailing address City of Chandler P O Box 52158 Phoenix, AZ 85072 Date(s) debt was incurred ____ Last 4 digits of account number <u>1000</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$209.04

Debtor	Noah Corporation <small>Name</small>	Case number (if known)	19-23840
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3.116	Nonpriority creditor's name and mailing address City of Charlotte P O Box 1316 Charlotte, NC 28201 Date(s) debt was incurred _____ Last 4 digits of account number <u>4339</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$199.46
<hr/>			
3.117	Nonpriority creditor's name and mailing address City of Columbus P O Box 182882 Columbus, OH 43218 Date(s) debt was incurred _____ Last 4 digits of account number <u>7748</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$384.50
<hr/>			
3.118	Nonpriority creditor's name and mailing address City of Fort Worth P O Box 961003 Fort Worth, TX 76161 Date(s) debt was incurred _____ Last 4 digits of account number <u>9194</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.119	Nonpriority creditor's name and mailing address City of High Point P O Box 10039 High Point, NC 27261 Date(s) debt was incurred _____ Last 4 digits of account number <u>7705</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.120	Nonpriority creditor's name and mailing address City of Irving P O Box 840898 Dallas, TX 75284 Date(s) debt was incurred _____ Last 4 digits of account number <u>2079</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$509.81
<hr/>			
3.121	Nonpriority creditor's name and mailing address City of Irving P O Box 840898 Dallas, TX 75284 Date(s) debt was incurred _____ Last 4 digits of account number <u>2085</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.122	Nonpriority creditor's name and mailing address City of Irving P O Box 840898 Dallas, TX 75284 Date(s) debt was incurred _____ Last 4 digits of account number <u>2086</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation Name	Case number (if known)	19-23840
--------	--------------------------	------------------------	----------

3.123	Nonpriority creditor's name and mailing address City of Lake Mary P O Box 950716 Lake Mary, FL 32795 Date(s) debt was incurred _____ Last 4 digits of account number <u>3240</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.124	Nonpriority creditor's name and mailing address City of Naperville P O Box 4231 Carol Stream, IL 60197 Date(s) debt was incurred _____ Last 4 digits of account number <u>3862</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.125	Nonpriority creditor's name and mailing address City of Plano P O Box 861990 Plano, TX 75086 Date(s) debt was incurred _____ Last 4 digits of account number <u>9814</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$659.66
3.126	Nonpriority creditor's name and mailing address City of Richardson P O Box 831907 Richardson, TX 75083 Date(s) debt was incurred _____ Last 4 digits of account number <u>4562</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$957.34
3.127	Nonpriority creditor's name and mailing address City of South Jordan 1600 W Towne Center Dr. South Jordan, UT 84095 Date(s) debt was incurred _____ Last 4 digits of account number <u>0649</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.128	Nonpriority creditor's name and mailing address City of South Jordan 1600 W Towne Center Dr. South Jordan, UT 84095 Date(s) debt was incurred _____ Last 4 digits of account number <u>1649</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.129	Nonpriority creditor's name and mailing address City of Southfield P O Box 33835 Detroit, MI 48232 Date(s) debt was incurred _____ Last 4 digits of account number <u>7001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$105.00

Debtor	Noah Corporation Name	Case number (if known)	19-23840
--------	--------------------------	------------------------	----------

3.130	Nonpriority creditor's name and mailing address City of Sugar Land P O Box 5029 Sugar Land, TX 77487 Date(s) debt was incurred ____ Last 4 digits of account number <u>4032</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$275.73
3.131	Nonpriority creditor's name and mailing address City of Tulsa Utilities Services Tulsa, OK 74187 Date(s) debt was incurred ____ Last 4 digits of account number <u>8424</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.132	Nonpriority creditor's name and mailing address City of Westminster P O Box 17040 Denver, CO 80217 Date(s) debt was incurred ____ Last 4 digits of account number <u>0909</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.133	Nonpriority creditor's name and mailing address Claire A. Harrington 375 Flat Mountain Road Highlands, NC 28741 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.134	Nonpriority creditor's name and mailing address Cleveland Clinic Foundation P O Box 92983 Cleveland, OH 44194 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,219.77
3.135	Nonpriority creditor's name and mailing address Clifford G. Ansara 65 Mountwood Road Swampscott, MA 01907 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.136	Nonpriority creditor's name and mailing address Coca Cola P O Box 809082 Chicago, IL 60680 Date(s) debt was incurred ____ Last 4 digits of account number <u>4112</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$397.68

Debtor	Noah Corporation Name	Case number (if known)	19-23840
--------	--------------------------	------------------------	----------

3.137	Nonpriority creditor's name and mailing address Coca Cola 3214 Hillsborough Road Durham, NC 27705 Date(s) debt was incurred ____ Last 4 digits of account number <u>3305</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$847.78
3.138	Nonpriority creditor's name and mailing address Coca Cola P O Box 536675 Pittsburgh, PA 15253 Date(s) debt was incurred ____ Last 4 digits of account number <u>4207</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,533.03
3.139	Nonpriority creditor's name and mailing address Coca Cola P O Box 110 Atlantic, IA 50022 Date(s) debt was incurred ____ Last 4 digits of account number <u>5984</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$463.70
3.140	Nonpriority creditor's name and mailing address Colonial Fire & Safety P O Box 81 American Fork, UT 84003 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$151.59
3.141	Nonpriority creditor's name and mailing address Columbia Gas of Ohio P O Box 742510 Cincinnati, OH 45274 Date(s) debt was incurred ____ Last 4 digits of account number <u>0003</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.142	Nonpriority creditor's name and mailing address Columbia Gas of Pennsylvania P O Box 742510 Cincinnati, OH 45274 Date(s) debt was incurred ____ Last 4 digits of account number <u>0007</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.143	Nonpriority creditor's name and mailing address Comcast P O Box 70219 Philadelphia, PA 19176 Date(s) debt was incurred ____ Last 4 digits of account number <u>5430</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Internet</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,925.39

Debtor	Noah Corporation Name	Case number (if known)	19-23840
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3.144	Nonpriority creditor's name and mailing address Comcast P O Box 70219 Philadelphia, PA 19176 Date(s) debt was incurred _____ Last 4 digits of account number <u>7420</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Internet</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,742.17
3.145	Nonpriority creditor's name and mailing address Comcast P O Box 70219 Philadelphia, PA 19176 Date(s) debt was incurred _____ Last 4 digits of account number <u>0370</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Internet</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$896.74
3.146	Nonpriority creditor's name and mailing address Comcast P O Box 70219 Philadelphia, PA 19176 Date(s) debt was incurred _____ Last 4 digits of account number <u>5650</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Internet</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$182.40
3.147	Nonpriority creditor's name and mailing address Comcast P O Box 70219 Philadelphia, PA 19176 Date(s) debt was incurred _____ Last 4 digits of account number <u>5010</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Internet</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,742.17
3.148	Nonpriority creditor's name and mailing address Comcast P O Box 70219 Philadelphia, PA 19176 Date(s) debt was incurred _____ Last 4 digits of account number <u>7330</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Internet</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,691.73
3.149	Nonpriority creditor's name and mailing address Comcast 26000 Cannon Rd. Cleveland, OH 44146 Date(s) debt was incurred _____ Last 4 digits of account number <u>3690</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Internet</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,202.76
3.150	Nonpriority creditor's name and mailing address Comcast P O Box 70219 Philadelphia, PA 19176 Date(s) debt was incurred _____ Last 4 digits of account number <u>3920</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Internet</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,349.80

Debtor	Noah Corporation		Case number (if known)	19-23840
	Name			

3.151	Nonpriority creditor's name and mailing address Comcast P O Box 70219 Philadelphia, PA 19176 Date(s) debt was incurred ____ Last 4 digits of account number <u>4832</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Internet</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,003.19</u>
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3.152	Nonpriority creditor's name and mailing address Comcast P O Box 70219 Philadelphia, PA 19176 Date(s) debt was incurred ____ Last 4 digits of account number <u>7898</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Internet</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$5,071.65</u>
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3.153	Nonpriority creditor's name and mailing address Comcast P O Box 70219 Philadelphia, PA 19176 Date(s) debt was incurred ____ Last 4 digits of account number <u>6230</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Internet</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$341.50</u>
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3.154	Nonpriority creditor's name and mailing address Comcast P O Box 70219 Philadelphia, PA 19176 Date(s) debt was incurred ____ Last 4 digits of account number <u>1530</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Internet</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,131.49</u>
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3.155	Nonpriority creditor's name and mailing address ComEd P O Box 6111 Carol Stream, IL 60197 Date(s) debt was incurred ____ Last 4 digits of account number <u>2159</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>
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3.156	Nonpriority creditor's name and mailing address Consolidated Communications P O Box 66523 Saint Louis, MO 63166 Date(s) debt was incurred ____ Last 4 digits of account number <u>0040</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Phone/Internet</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$421.32</u>
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3.157	Nonpriority creditor's name and mailing address Consumer Energy P O Box 740309 Cincinnati, OH 45274 Date(s) debt was incurred ____ Last 4 digits of account number <u>0714</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>
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Debtor	Noah Corporation Name	Case number (if known)	19-23840
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3.158	Nonpriority creditor's name and mailing address Consumer Energy P O Box 740309 Cincinnati, OH 45274 Date(s) debt was incurred ____ Last 4 digits of account number <u>4348</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.159	Nonpriority creditor's name and mailing address Continuum Services P O Box 996 Novi, MI 48376 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,872.00
<hr/>			
3.160	Nonpriority creditor's name and mailing address Control Technologies, Inc. 111 Zachary Road Manchester, NH 03109 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,700.00
<hr/>			
3.161	Nonpriority creditor's name and mailing address Cory Holmes 815 East 600 North Heber City, UT 84032 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$32,756.64
<hr/>			
3.162	Nonpriority creditor's name and mailing address Cowan Land Company Attn: Wayne Cowan 203 Queen Palm Drive Edgewater, FL 32141 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.163	Nonpriority creditor's name and mailing address Cox Business P O Box 248851 Oklahoma City, OK 73124 Date(s) debt was incurred ____ Last 4 digits of account number <u>6001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Internet</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$577.19
<hr/>			
3.164	Nonpriority creditor's name and mailing address Cox Business P O Box 248851 Oklahoma City, OK 73124 Date(s) debt was incurred ____ Last 4 digits of account number <u>9601</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Internet</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$778.22

Debtor	Noah Corporation Name	Case number (if known)	19-23840
--------	--------------------------	------------------------	----------

3.165	Nonpriority creditor's name and mailing address Cox Business P O Box 248871 Oklahoma City, OK 73124 Date(s) debt was incurred ____ Last 4 digits of account number <u>3401</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$281.82
<hr/>			
3.166	Nonpriority creditor's name and mailing address CPS Energy P O Box 2678 San Antonio, TX 78289 Date(s) debt was incurred ____ Last 4 digits of account number <u>4372</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,891.91
<hr/>			
3.167	Nonpriority creditor's name and mailing address Craig A. Cousins 12308 Icarus Lane Poway, CA 92064 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.168	Nonpriority creditor's name and mailing address Craig Steed 1236 Knittles Kove Lehi, UT 84043 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$26,062.48
<hr/>			
3.169	Nonpriority creditor's name and mailing address Cranberry Township 2525 Rochester Rd. Ste 400 Cranberry Twp, PA 16066 Date(s) debt was incurred ____ Last 4 digits of account number <u>5175</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$225.90
<hr/>			
3.170	Nonpriority creditor's name and mailing address Cromapts, LLC Attn: Peter Cromarty P O Box 237154 Ansonia Station New York, NY 10023 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.171	Nonpriority creditor's name and mailing address Cynthia A. Wolz 9803 Texas Highway 242, Ste. 200 Box 134 Conroe, TX 77385 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation Name	Case number (if known)	19-23840
--------	--------------------------	------------------------	----------

3.172	Nonpriority creditor's name and mailing address Dale Ziegenfelder Diana Ziegenfelder P O Box 254 Glenford, NY 12433 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.173	Nonpriority creditor's name and mailing address Dan G. Haskell 55 North New Saddle Drive P O Box 229 Stockton, UT 84071-0229 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.174	Nonpriority creditor's name and mailing address Dan Naylor 2595 East 9900 South Sandy, UT 84092 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured Loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$202,000.00
<hr/>			
3.175	Nonpriority creditor's name and mailing address Dana L. Winchester 74 Kaufman Drive Peterborough, NH 03458 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.176	Nonpriority creditor's name and mailing address Dane County S & O Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,490.96
<hr/>			
3.177	Nonpriority creditor's name and mailing address Daniel J. Dion Revocable Trust 153 Horizon Drive Goffstown, NH 03045 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.178	Nonpriority creditor's name and mailing address Daniel P. & Kaitlin E. Maney 17406 NE 123rd Street Kearney, MO 64060 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation <small>Name</small>	Case number (if known)	19-23840
--------	---	------------------------	----------

3.179	Nonpriority creditor's name and mailing address Darryl B. Fullam Carla B. Fullam 577 Edwards Road Columbus, NC 28722 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.180	Nonpriority creditor's name and mailing address David A. Burger Marilyn M. Burger 1600 N. Wood Avenue Marshfield, WI 54449 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.181	Nonpriority creditor's name and mailing address David C. Dion Charlotte M. Dion 46 Pasture Road Auburn, NH 03032 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.182	Nonpriority creditor's name and mailing address David E. Osvog PO Box 893 Parker, CO 80134 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.183	Nonpriority creditor's name and mailing address David Fairbanks Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$102,000.00
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3.184	Nonpriority creditor's name and mailing address David P. Every 561 Easton Valley Road Easton, NH 03580 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.185	Nonpriority creditor's name and mailing address Debbie Aaron PO Box 263 Greenbank, WA 98253 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$102,499.99
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Debtor	Noah Corporation Name	Case number (if known)	19-23840
--------	--------------------------	------------------------	----------

3.186	Nonpriority creditor's name and mailing address Dee & Deanna Packer 1291 East 2050 South Bountiful, UT 84010 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15,450.00
3.187	Nonpriority creditor's name and mailing address Dennis Dupray 1801 Belvedere St. Golden, CO 80401 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.188	Nonpriority creditor's name and mailing address Dennis G. Bengtson 20140 Amy Lee Drive Cornelius, NC 28031 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.189	Nonpriority creditor's name and mailing address Dept of Public Works City of Auburn Hill P O Box 772120 Detroit, MI 48277 Date(s) debt was incurred ____ Last 4 digits of account number <u>3391</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.190	Nonpriority creditor's name and mailing address Devin Durrant 200 North Canyon Road Provo, UT 84604 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$168,000.00
3.191	Nonpriority creditor's name and mailing address DialPad Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.192	Nonpriority creditor's name and mailing address Diane Cary 155 Rosebay Dr. #5 Encinitas, CA 92024 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation Name	Case number (if known)	19-23840
--------	--------------------------	------------------------	----------

3.193	Nonpriority creditor's name and mailing address Direct TV P O Box 5006 Carol Stream, IL 60197 Date(s) debt was incurred ____ Last 4 digits of account number <u>2040</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$386.91
3.194	Nonpriority creditor's name and mailing address Direct TV P O Box 5006 Carol Stream, IL 60197 Date(s) debt was incurred ____ Last 4 digits of account number <u>2746</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$438.79
3.195	Nonpriority creditor's name and mailing address Direct TV P O Box 5006 Carol Stream, IL 60197 Date(s) debt was incurred ____ Last 4 digits of account number <u>8344</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$398.84
3.196	Nonpriority creditor's name and mailing address Direct TV P O Box 5006 Carol Stream, IL 60197 Date(s) debt was incurred ____ Last 4 digits of account number <u>9780</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$309.30
3.197	Nonpriority creditor's name and mailing address Direct TV P O Box 5006 Carol Stream, IL 60197 Date(s) debt was incurred ____ Last 4 digits of account number <u>8358</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$214.66
3.198	Nonpriority creditor's name and mailing address Direct TV P O Box 5006 Carol Stream, IL 60197 Date(s) debt was incurred ____ Last 4 digits of account number <u>7122</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$173.81
3.199	Nonpriority creditor's name and mailing address Direct TV P O Box 5006 Carol Stream, IL 60197 Date(s) debt was incurred ____ Last 4 digits of account number <u>5988</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$421.05

Debtor	Noah Corporation Name	Case number (if known)	19-23840
--------	--------------------------	------------------------	----------

3.200	Nonpriority creditor's name and mailing address Direct TV P O Box 5006 Carol Stream, IL 60197 Date(s) debt was incurred ____ Last 4 digits of account number <u>8129</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$349.89
3.201	Nonpriority creditor's name and mailing address Direct TV P O Box 5006 Carol Stream, IL 60197 Date(s) debt was incurred ____ Last 4 digits of account number <u>2382</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$490.55
3.202	Nonpriority creditor's name and mailing address Direct TV P O Box 5006 Carol Stream, IL 60197 Date(s) debt was incurred ____ Last 4 digits of account number <u>2348</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$164.53
3.203	Nonpriority creditor's name and mailing address Direct TV P O Box 5006 Carol Stream, IL 60197 Date(s) debt was incurred ____ Last 4 digits of account number <u>9721</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$241.03
3.204	Nonpriority creditor's name and mailing address Direct TV P O Box 5006 Carol Stream, IL 60197 Date(s) debt was incurred ____ Last 4 digits of account number <u>5830</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$201.33
3.205	Nonpriority creditor's name and mailing address Direct TV P O Box 5006 Carol Stream, IL 60197 Date(s) debt was incurred ____ Last 4 digits of account number <u>1038</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$449.94
3.206	Nonpriority creditor's name and mailing address Direct TV P O Box 5006 Carol Stream, IL 60197 Date(s) debt was incurred ____ Last 4 digits of account number <u>5917</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$202.54

Debtor	Noah Corporation Name	Case number (if known)	19-23840
--------	--------------------------	------------------------	----------

3.207	Nonpriority creditor's name and mailing address Direct TV P O Box 5006 Carol Stream, IL 60197 Date(s) debt was incurred ____ Last 4 digits of account number <u>4601</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$202.58
<hr/>			
3.208	Nonpriority creditor's name and mailing address Direct TV P O Box 5006 Carol Stream, IL 60197 Date(s) debt was incurred ____ Last 4 digits of account number <u>8182</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.209	Nonpriority creditor's name and mailing address Direct TV P O Box 5006 Carol Stream, IL 60197 Date(s) debt was incurred ____ Last 4 digits of account number <u>0229</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$350.27
<hr/>			
3.210	Nonpriority creditor's name and mailing address Direct TV P O Box 5006 Carol Stream, IL 60197 Date(s) debt was incurred ____ Last 4 digits of account number <u>1018</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$395.77
<hr/>			
3.211	Nonpriority creditor's name and mailing address Direct TV P O Box 5006 Carol Stream, IL 60197 Date(s) debt was incurred ____ Last 4 digits of account number <u>4492</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$248.58
<hr/>			
3.212	Nonpriority creditor's name and mailing address Direct TV P O Box 5006 Carol Stream, IL 60197 Date(s) debt was incurred ____ Last 4 digits of account number <u>5689</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$191.58
<hr/>			
3.213	Nonpriority creditor's name and mailing address Direct TV P O Box 5006 Carol Stream, IL 60197 Date(s) debt was incurred ____ Last 4 digits of account number <u>9974</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$202.97

Debtor	Noah Corporation Name	Case number (if known)	19-23840
--------	--------------------------	------------------------	----------

3.214	Nonpriority creditor's name and mailing address Direct TV P O Box 5006 Carol Stream, IL 60197 Date(s) debt was incurred ____ Last 4 digits of account number <u>1979</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$197.97
3.215	Nonpriority creditor's name and mailing address Direct TV P O Box 5006 Carol Stream, IL 60197 Date(s) debt was incurred ____ Last 4 digits of account number <u>2552</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$433.19
3.216	Nonpriority creditor's name and mailing address Diversified Insurance Group 126 East South Temple, Suite 2300 Salt Lake City, UT 84111 Date(s) debt was incurred ____ Last 4 digits of account number <u>6708</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,415.50
3.217	Nonpriority creditor's name and mailing address Docusign P O Box 123428 Dallas, TX 75312 Date(s) debt was incurred ____ Last 4 digits of account number <u>0775</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.218	Nonpriority creditor's name and mailing address Dominic P. Orgettas 129 Pearl Street Burlington, MA 01803 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.219	Nonpriority creditor's name and mailing address Dominion Energy P O Box 45841 Salt Lake City, UT 84139 Date(s) debt was incurred ____ Last 4 digits of account number <u>6999</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$368.09
3.220	Nonpriority creditor's name and mailing address Dominion Energy P O Box 45841 Salt Lake City, UT 84139 Date(s) debt was incurred ____ Last 4 digits of account number <u>3615</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$244.04

Debtor	Noah Corporation <small>Name</small>	Case number (if known)	19-23840
--------	---	------------------------	----------

3.221	Nonpriority creditor's name and mailing address Dominion Virginia Power P O Box 26543 Richmond, VA 23290 Date(s) debt was incurred ____ Last 4 digits of account number <u>7034</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,417.05
3.222	Nonpriority creditor's name and mailing address Don Hooser 3960 S Woodland View Dr Kamas, UT 84036 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$27,291.63
3.223	Nonpriority creditor's name and mailing address Donald C. Pierson Rosemarie Tomell Pierson 130 California Quarry Rd Woodstock, NY 12498 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.224	Nonpriority creditor's name and mailing address Donald Lang 1643 Beacon Street, Suite 22 Waban, MA 02468 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.225	Nonpriority creditor's name and mailing address Donald P. Smith Rosemary B. Smith Sonoma, CA 95476 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.226	Nonpriority creditor's name and mailing address Donald R. Fraser Cheryl McMahon Fraser 2 Cedar St. Marblehead, MA 01945 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.227	Nonpriority creditor's name and mailing address Doriann Demello 85-033 Lualualei Hmstd Rd Waianae, HI 96792 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,416.65

Debtor	Noah Corporation Name	Case number (if known)	19-23840
--------	--------------------------	------------------------	----------

3.228	Nonpriority creditor's name and mailing address Double T-Des Moines, LLC Attn: Todd Thacker P O Box 281 Jensen, UT 84035 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.229	Nonpriority creditor's name and mailing address Doug Sullivan 11648 S Ingot Way South Jordan, UT 84095 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$810,652.20
3.230	Nonpriority creditor's name and mailing address Douglas S. Peterson 4036 S. 900 W. Riverdale, UT 84405 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.231	Nonpriority creditor's name and mailing address Dr. P.M. Corp. Attn: Pat Mazhari 103 Avalon Court Canton, GA 30115 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.232	Nonpriority creditor's name and mailing address Dryjas Holdings, LLC Attn: Mark Dryjas P O Box 533 Glen, NH 03838 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.233	Nonpriority creditor's name and mailing address DTE Energy One Energy Plaza Detroit, MI 48226 Date(s) debt was incurred ____ Last 4 digits of account number <u>8637</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$349.20
3.234	Nonpriority creditor's name and mailing address Duke Energy P O Box 1326 Charlotte, NC 28201 Date(s) debt was incurred ____ Last 4 digits of account number <u>0012</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation <small>Name</small>	Case number (if known)	19-23840
--------	---	------------------------	----------

3.235	Nonpriority creditor's name and mailing address Duke Energy P O Box 1326 Charlotte, NC 28201 Date(s) debt was incurred ____ Last 4 digits of account number <u>8114</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.236	Nonpriority creditor's name and mailing address Duke Energy P O Box 70516 Charlotte, NC 28272 Date(s) debt was incurred ____ Last 4 digits of account number <u>5526</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.237	Nonpriority creditor's name and mailing address Duke Energy P O Box 70516 Charlotte, NC 28272 Date(s) debt was incurred ____ Last 4 digits of account number <u>5949</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.238	Nonpriority creditor's name and mailing address Duke Energy P O Box 70516 Charlotte, NC 28272 Date(s) debt was incurred ____ Last 4 digits of account number <u>0164</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$613.81
<hr/>			
3.239	Nonpriority creditor's name and mailing address E & H Jackson, LLC Attn: Tiberich & Emilia 2652 Cropsey Ave, Apt #8F Brooklyn, NY 11214 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.240	Nonpriority creditor's name and mailing address E&J Trailer Sales & Services, Inc. 610 Wayne Park Drive Cincinnati, OH 45215 Date(s) debt was incurred ____ Last 4 digits of account number <u>7965</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$187.25
<hr/>			
3.241	Nonpriority creditor's name and mailing address EC9 Holdings, LLC Attn: Grace Weis 3948 3rd St S #134 Jacksonville Beach, FL 32250 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation Name	Case number (if known)	19-23840
--------	--------------------------	------------------------	----------

3.242	Nonpriority creditor's name and mailing address Eduardo B.V. da Silveira 435 Willow Glen Way San Jose, CA 95125 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.243	Nonpriority creditor's name and mailing address Edward A. Hennessey 2001 Revocable Living Trust 58 West Elm Street Littleton, NH 03561 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.244	Nonpriority creditor's name and mailing address Edwards Electronic Systems, Inc. P O Box 39 Charlotte, NC 28227 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$441.00
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3.245	Nonpriority creditor's name and mailing address Edwin Neimann 1506 Jennifer Court Irwin, PA 15642-1891 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$54,645.49
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3.246	Nonpriority creditor's name and mailing address Elaine Horrocks 1467 Indian Hills Dr Salt Lake City, UT 84108 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$509,166.65
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3.247	Nonpriority creditor's name and mailing address Eldon Haacke 1882 Rich Way Salt Lake City, UT 84121 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$34,636.25
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3.248	Nonpriority creditor's name and mailing address Eldridge Holdings TOO LLC Attn: Morgan Powell 777 West End Ave, 7A New York, NY 10025 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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Debtor	Noah Corporation Name	Case number (if known)	19-23840
--------	--------------------------	------------------------	----------

3.249	Nonpriority creditor's name and mailing address Electric Illuminating Co/Peerless Electr P O Box 3687 Akron, OH 44309 Date(s) debt was incurred ____ Last 4 digits of account number <u>3470</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$897.44
<hr/>			
3.250	Nonpriority creditor's name and mailing address Elite Landscape Group P O Box 3936 Naperville, IL 60567 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$13,147.00
<hr/>			
3.251	Nonpriority creditor's name and mailing address Elizabeth R. Fischer P O box 1037 Dover, NH 03821 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.252	Nonpriority creditor's name and mailing address Elizabeth W. Bradley 2121 N Frontage Road, #259 Vail, CO 81657 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.253	Nonpriority creditor's name and mailing address Elva Jo Edwards 5155 W Quincy Ave. G108 Denver, CO 80236 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.254	Nonpriority creditor's name and mailing address Entergy Arkansas P O Box 8101 Baton Rouge, LA 70891 Date(s) debt was incurred ____ Last 4 digits of account number <u>9958</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.255	Nonpriority creditor's name and mailing address EnTouch P O Box 4343 Dept. 669 Houston, TX 77210 Date(s) debt was incurred ____ Last 4 digits of account number <u>8930</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Phone/Internet</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Name	Case number (if known)	19-23840
3.256	Nonpriority creditor's name and mailing address Equity Trust Company Custodian FBO John Croft IRA P O Box 451340 Westlake, OH 44145 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.257	Nonpriority creditor's name and mailing address Esterhill Boat Service Corporation Attn: Bob Every 561 Easton Valley Road Franconia, NH 03580 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.258	Nonpriority creditor's name and mailing address Eugene M. Spiritus Susan F. Spiritus 9 DOMANI Drive Newport Coast, CA 92657 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.259	Nonpriority creditor's name and mailing address EverSource P O Box 56003 Boston, MA 02205 Date(s) debt was incurred ____ Last 4 digits of account number <u>8077</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.260	Nonpriority creditor's name and mailing address Expo Land Corp Attn: John Grasso 7405 Chouder Lane Wake Forest, NC 27587 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.261	Nonpriority creditor's name and mailing address Fairacres Lawn, Inc. P O Box 641846 Omaha, NE 68164 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,670.00
3.262	Nonpriority creditor's name and mailing address Fanny Peters 56 Tibbetts Road Yonkers, NY 10705 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation <small>Name</small>	Case number (if known)	19-23840
--------	---	------------------------	----------

3.263	Nonpriority creditor's name and mailing address FedEx P O Box 7221 Pasadena, CA 91109 Date(s) debt was incurred ____ Last 4 digits of account number <u>6221</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$34,256.23
3.264	Nonpriority creditor's name and mailing address Fine Edge Lawn & Landscaping 1960 Champion Cr Virginia Beach, VA 23456 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,500.00
3.265	Nonpriority creditor's name and mailing address Fisher Investments Family Ltd. Partnersh 6467 S 1850 E Ogden, UT 84405-9704 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.266	Nonpriority creditor's name and mailing address Four Brothers Plus One, Inc. Attn: Ken Royal 96 Ashworth Avenue Hampton, NH 03842 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.267	Nonpriority creditor's name and mailing address Frank & Sally Irrevocable Trust 1343 6th St. Turtle Lake, ND 58575 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.268	Nonpriority creditor's name and mailing address Franklin W. Krause P O Box 79 Hermosa, SD 57744 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.269	Nonpriority creditor's name and mailing address Frederic Jay Gregory 1117 Washington St Lineville, IA 50147-2021 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation <small>Name</small>	Case number (if known)	19-23840
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3.270	Nonpriority creditor's name and mailing address Full Care 974 Breckenridge Lane #226 Louisville, KY 40207 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$111.30
3.271	Nonpriority creditor's name and mailing address Gables Investments, LLC Attn: Terry & Patricia Holt 1340 Asturia Avenue Coral Gables, FL 33134 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.272	Nonpriority creditor's name and mailing address Gangwer, Jesse & June Town and Campus, Inc. 105 Perkins Road Madbury, NH 03823 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.273	Nonpriority creditor's name and mailing address Gary R. Neil P O Box 730 Quechee, VT 05059 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.274	Nonpriority creditor's name and mailing address Gator I Properties, Inc. P O Box 63879 Philadelphia, PA 19147 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.275	Nonpriority creditor's name and mailing address George Rakowski 4278 Roxbury St Simi Valley, CA 93063 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$154,753.83
3.276	Nonpriority creditor's name and mailing address Georgie's Yard Services 1105 Chelwood Park NE Albuquerque, NM 87112 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$387.87

Debtor	Name	Case number (if known)	19-23840
3.277	Nonpriority creditor's name and mailing address Gertraude Winkler 7021 San Bartolo Street Carlsbad, CA 92011 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.278	Nonpriority creditor's name and mailing address Glen & Deanna Davis 920 9th St. West Babylon, NY 11704 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.279	Nonpriority creditor's name and mailing address Glenn A Smith Family Intervivos & Revoca 5930 W. 10400 N. Elwood, UT 84337 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.280	Nonpriority creditor's name and mailing address Gloucester Medical Real Estate Holdings 6034 Belroi Springs Lane Gloucester, VA 23061 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.281	Nonpriority creditor's name and mailing address Goffstown Horizon Properties, LLC Attn: Daniel Dion 153 Horizon Drive Goffstown, NH 03045 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.282	Nonpriority creditor's name and mailing address Granite Landscape P O Box 80078 Keller, TX 76244 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$16,317.09
3.283	Nonpriority creditor's name and mailing address Great American Financial Services P O Box 660831 Dallas, TX 75266 Date(s) debt was incurred ____ Last 4 digits of account number <u>8000</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$894.70

Debtor	Noah Corporation <small>Name</small>	Case number (if known)	19-23840
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3.284	Nonpriority creditor's name and mailing address Greater Omaha Chamber 808 Conagra Dr. Suite 400 Omaha, NE 68102 Date(s) debt was incurred ____ Last 4 digits of account number <u>3085</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$435.00
<hr/>			
3.285	Nonpriority creditor's name and mailing address Green Acre Woodlands, Inc. Attn: Charles Bonin 133 Washington Street Morristown, NJ 07960 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.286	Nonpriority creditor's name and mailing address Green Pride Landscaping P O Box 147 Missouri City, TX 77459 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,650.00
<hr/>			
3.287	Nonpriority creditor's name and mailing address Greenscape 7902 U.S. Highway 70 Memphis, TN 38133 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$741.00
<hr/>			
3.288	Nonpriority creditor's name and mailing address Greenville Water P O Box 687 Greenville, SC 29602 Date(s) debt was incurred ____ Last 4 digits of account number <u>1025</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$104.63
<hr/>			
3.289	Nonpriority creditor's name and mailing address Greenville Water P O Box 687 Greenville, SC 29602 Date(s) debt was incurred ____ Last 4 digits of account number <u>1020</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$84.81
<hr/>			
3.290	Nonpriority creditor's name and mailing address Gregory Cloutier 80A Elm Street Lancaster, NH 03584 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation Name	Case number (if known)	19-23840
--------	--------------------------	------------------------	----------

3.291	Nonpriority creditor's name and mailing address Gregory D. Robinson Susan P. Robinson P O Box 64379 Colorado Springs, CO 80962 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.292	Nonpriority creditor's name and mailing address Gregory Gibbs 1888 Fiorica Way Brentwood, CA 94513-7221 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$85,226.00
3.293	Nonpriority creditor's name and mailing address Groundhog Landscaping P O Box 1316 Londonderry, NH 03053 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.294	Nonpriority creditor's name and mailing address Guggenheim Retail Real Estate Partners 3000 Internet Boulevard, Suite 570 Frisco, TX 75034 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,356,872.00
3.295	Nonpriority creditor's name and mailing address Guy P. Randazzo Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.296	Nonpriority creditor's name and mailing address GW Systems, Inc. 1701 Timocuan Way Longwood, FL 32750 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,646.88
3.297	Nonpriority creditor's name and mailing address Gyula Molnar 4644 Hayvenhurst Ave Encino, CA 91436 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor Noah Corporation Case number (if known) 19-23840
Name

3.298	Nonpriority creditor's name and mailing address Hal Brown 854 E Southfork Dr. Draper, UT 84020 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$112,000.00
<hr/>			
3.299	Nonpriority creditor's name and mailing address Hamilton, Curtis 940 Tanglewood Ct. Twin Falls, ID 83301 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.300	Nonpriority creditor's name and mailing address Hampton Roads Utility Billing Service P O Box 37097 Boone, IA 50037 Date(s) debt was incurred ____ Last 4 digits of account number <u>5400</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$185.17
<hr/>			
3.301	Nonpriority creditor's name and mailing address Harvey A. Paul 17 Pleasant Street South Berwick, ME 03908 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.302	Nonpriority creditor's name and mailing address Heather H. Thomas 107 Champion Street Steilacoom, WA 98388 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.303	Nonpriority creditor's name and mailing address Hemenway & Barnes 75 State Street Boston, MA 02109 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Legal Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$30,046.26
<hr/>			
3.304	Nonpriority creditor's name and mailing address Henry Noahs Dublin LLC Attn: Richard Abraham 33 Fairview Avenue Tarrytown, NY 10591 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation <small>Name</small>	Case number (if known)	19-23840
--------	---	------------------------	----------

3.305	Nonpriority creditor's name and mailing address Henryk Sarat 839 Leavenworth, Unit 104 San Francisco, CA 94109 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.306	Nonpriority creditor's name and mailing address Herbert Wiehl Ursula Wiehl 2045 Cornell Pl. Port Orange, FL 32128 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.307	Nonpriority creditor's name and mailing address Hermes Landscaping 13030 W 87th St Pkwy Lenexa, KS 66215 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,550.73
3.308	Nonpriority creditor's name and mailing address Historic Spicer, LLC Attn: John Van Sciver 2449 E 14th Ave. Denver, CO 80206 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.309	Nonpriority creditor's name and mailing address Hoi Yuk Choi Attn: Carol Choi 761 E. 10 S. American Fork, UT 84003 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.310	Nonpriority creditor's name and mailing address Homes Development Corporation Attn: John Esserian 23 A, Adams Street Burlington, MA 01803 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.311	Nonpriority creditor's name and mailing address Horizon Management, LLC Attn: Peter Cammann P O Box 862 Williston, VT 05495 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation <small>Name</small>	Case number (if known)	19-23840
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3.312	Nonpriority creditor's name and mailing address Horticare Landscape P O Box 4307 Little Rock, AR 72214 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,329.80
<hr/>			
3.313	Nonpriority creditor's name and mailing address Integrated Safety Services 9082 Marshall Ct Westminster, CO 80031 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$274.92
<hr/>			
3.314	Nonpriority creditor's name and mailing address Integrity Green Landscaping 7701 Eustiss Ct Deerpark, OH 45236 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.315	Nonpriority creditor's name and mailing address INVYNC, LLC Attn: Senthil Ranganathan/Vallie Muruges 12 Sequoia Dr. Dayton, NJ 08810 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.316	Nonpriority creditor's name and mailing address IPL Realty, LLC Attn: Brian MacKenzie 246 Birch Acres Rd. New London, NH 03257 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.317	Nonpriority creditor's name and mailing address IRA Services Trust Company CFBO Gertraude Winkler IRA787292 P O Box 7080 San Carlos, CA 94070 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.318	Nonpriority creditor's name and mailing address IRA Services Trust Company CFBO Jon R. Addison IRA336178 San Carlos, CA 94070 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation Name	Case number (if known)	19-23840
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3.319	Nonpriority creditor's name and mailing address IRA Services Trust Company CFBO Arthur R. Roso 506916 San Carlos, CA 94070 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.320	Nonpriority creditor's name and mailing address IRA Services Trust Company CFBO Louis Duane Blakeslee, IRA 738761 P O Box 7080 San Carlos, CA 94070 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.321	Nonpriority creditor's name and mailing address Isabella Fiore 2278 East One Street Brooklyn, NY 11223 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.322	Nonpriority creditor's name and mailing address Iscapes Inc. 4517 Springbrook Drive Burlington, NC 27215 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,500.00
3.323	Nonpriority creditor's name and mailing address Ivan Briggs 13443 South Palawan Way Riverton, UT 84065 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$27,479.12
3.324	Nonpriority creditor's name and mailing address Ivy Fasko 112 Quarry View Dr. Morgantown, PA 19543 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$102,000.00
3.325	Nonpriority creditor's name and mailing address J & J Real Estate Investments, LLC 4549 North County Road, 400 East Pittsboro, IN 46167 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation Name	Case number (if known)	19-23840
--------	--------------------------	------------------------	----------

3.326	Nonpriority creditor's name and mailing address J Craig Larsen 1336 West Ammon Way South Jordan, UT 84095 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$128,678.36
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3.327	Nonpriority creditor's name and mailing address J.W. Richen Trust 3521 Jackdaw St. San Diego, CA 92103 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.328	Nonpriority creditor's name and mailing address Jack's Custom Works Attn: Jack Addison PO Box 2111 Sisters, OR 97759 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.329	Nonpriority creditor's name and mailing address Jackie Goode PO Box 692 Hurricane, UT 84737 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$22,208.30
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3.330	Nonpriority creditor's name and mailing address Jacqueline L. Gardiner 2803 Sancho Panza Ct. Punta Gorda, FL 33950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.331	Nonpriority creditor's name and mailing address Jakes Law & Landscaping 9028 Harding St Indianola, IA 50125 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,580.00
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3.332	Nonpriority creditor's name and mailing address James A. Sheridan Brigid P. Sheridan 28 Thicket Irvine, CA 92614 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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Debtor	Noah Corporation Name	Case number (if known)	19-23840
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3.333	Nonpriority creditor's name and mailing address James D. Elizabeth A. Senn 2201 N. M Road Marquette, NE 68854 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.334	Nonpriority creditor's name and mailing address James Wallace 2422 Fairmont Ave Santa Ana, CA 92706 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$103,954.16
<hr/>			
3.335	Nonpriority creditor's name and mailing address Janet R. Parsons 20 Skyview Drive Greenland, NH 03840 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.336	Nonpriority creditor's name and mailing address Jarvis B. Rasmussen 113 N 100 W Lehi, UT 84043 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.337	Nonpriority creditor's name and mailing address Jason M. Boynton 10929 AP Hill CT Bristow, VA 20136 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.338	Nonpriority creditor's name and mailing address JDB Holdings, LLC 14 Goss Road North Hampton, NH 03862 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.339	Nonpriority creditor's name and mailing address JE Systems, Inc. P O Box 6246 Fort Smith, AR 72906 Date(s) debt was incurred ____ Last 4 digits of account number <u>2015</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$84.64

Debtor	Noah Corporation Name	Case number (if known)	19-23840
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3.340	Nonpriority creditor's name and mailing address Jean M. Bonetti 22 Concord Lane Uxbridge, MA 01569 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.341	Nonpriority creditor's name and mailing address Jean Pierre Samson 10424 Orange Ave. South Gate, CA 90280 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.342	Nonpriority creditor's name and mailing address Jeanne Jackson Exempt Trust 10272 Foothills Highway Longmont, CO 80503 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.343	Nonpriority creditor's name and mailing address Jeannette Bonin c/o Charles V. Bonin 133 Washington Street Morristown, NJ 07960 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$204,000.00
<hr/>			
3.344	Nonpriority creditor's name and mailing address Jeff Bettinson 9872 S. Heytesbury Ln. Sandy, UT 84092 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$35,991.68
<hr/>			
3.345	Nonpriority creditor's name and mailing address Jeffrey Limb 1334 S Haight Creek Dr Kaysville, UT 84037 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$81,700.01
<hr/>			
3.346	Nonpriority creditor's name and mailing address Jeffrey R. Dickerson Gayla R. Nicholson PO Box 947 Livingston, MT 59047 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation <small>Name</small>	Case number (if known)	19-23840
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3.347	Nonpriority creditor's name and mailing address Jen-Scot, Inc. Attn: Norm Ramsey P O Box 632 New Castle, NH 03854 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.348	Nonpriority creditor's name and mailing address Jill Hanna-Gore 435 Olive St. Chico, CA 95928 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.349	Nonpriority creditor's name and mailing address Jill Krishnamurthy 2546 West Pebble Creek Lane Lehi, UT 84043 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.350	Nonpriority creditor's name and mailing address Jim Dunlop Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$102,000.00
3.351	Nonpriority creditor's name and mailing address JK Alarm Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$79.74
3.352	Nonpriority creditor's name and mailing address John A. Eddy Laura C. Eddy 413 Walnut St. #5401 Green Cove Springs, FL 32043 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.353	Nonpriority creditor's name and mailing address John D. Hamrick Mary J. O'Toole 2103 Saint Johnsbury Road Littleton, NH 03561 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Name	Case number (if known)	19-23840
3.354	Nonpriority creditor's name and mailing address John Michael Lalli III 2569 West 2nd Street Brooklyn, NY 11223 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.355	Nonpriority creditor's name and mailing address John Mongiello Margaret Mongiello 21 Point Breeze Road Wolfeboro, NH 03894 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.356	Nonpriority creditor's name and mailing address John N. Pikulin Revocable Trust 221 Bridge Street New Cumberland, PA 17070 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.357	Nonpriority creditor's name and mailing address John R. Walker Virginia V. Walker P O Box 542814 Merritt Island, FL 32952 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.358	Nonpriority creditor's name and mailing address John T. Halloran Patricia C. Halloran 1471 Appian Drive Punta Gorda, FL 33950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.359	Nonpriority creditor's name and mailing address John T. Halloran Revocable Trust Attn: John & Patricia 1471 Appian Drive Punta Gorda, FL 33950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.360	Nonpriority creditor's name and mailing address John Thomas Barnett Patricia A. Barnett 2900 Jeff Myers Circle Sarasota, FL 34240 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Name	Case number (if known)	19-23840
3.361	Nonpriority creditor's name and mailing address John V. Phillips Karleen L. Phillips 1550 NW Marjo Lane McMinnville, OR 97128 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.362	Nonpriority creditor's name and mailing address John W. Vansciver 2449 E 14th Ave Denver, CO 80206 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.363	Nonpriority creditor's name and mailing address Johnson County Wasterwater P O Box 219948 Kansas City, MO 64121 Date(s) debt was incurred ____ Last 4 digits of account number <u>6864</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$18.09
3.364	Nonpriority creditor's name and mailing address Jon C. Parise Michelle L. Parise 710 Arbor Dr. San Leandro, CA 94577 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.365	Nonpriority creditor's name and mailing address Joseph and Grace Zambito Family Trust 151-51 23rd Avenue Whitestone, NY 11357 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.366	Nonpriority creditor's name and mailing address Josie Addamo Barney J. Addamo 2252 Ivory Place Carlsbad, CA 92009 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.367	Nonpriority creditor's name and mailing address Joy Venture, LLC PO Box 233 Paisley, FL 32767 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation Name	Case number (if known)	19-23840
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3.368	Nonpriority creditor's name and mailing address Judi Davenport 3263 Claremont Way Napa, CA 94558 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$750,000.00
<hr/>			
3.369	Nonpriority creditor's name and mailing address Judith T. Spang Revocable Trust 55 Wiswall Road Durham, NH 03824 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.370	Nonpriority creditor's name and mailing address K. Boyd Rasmussen Jetta Marie Rasmussen 5959 W. 10100 N. Highland, UT 84003 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.371	Nonpriority creditor's name and mailing address Kansas Gas Service P O Box 219046 Kansas City, MO 64121 Date(s) debt was incurred ____ Last 4 digits of account number <u>1800</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.372	Nonpriority creditor's name and mailing address Kansas Gas Service P O Box 219046 Kansas City, MO 64121 Date(s) debt was incurred ____ Last 4 digits of account number <u>5427</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$106.41
<hr/>			
3.373	Nonpriority creditor's name and mailing address Karen A. Wagner 1337 Garvin Hill Road Greensboro, VT 05841 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.374	Nonpriority creditor's name and mailing address Katherine Haglund P O Box 531028 Henderson, NV 89053 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation Name	Case number (if known)	19-23840
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3.375	Nonpriority creditor's name and mailing address Kathie Muhler Revocable Trust 851 Burlway Road, Suite 600 Burlingame, CA 94010 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.376	Nonpriority creditor's name and mailing address Kathy L. Chan 114 Mackenzie Lane South Denville, NJ 07834 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.377	Nonpriority creditor's name and mailing address KavNiya (RK) 145, Singaravelan Salai Rd Palavakkam, Chennai, Tamil Nadu 600041 INDIA Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$100,867.00
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3.378	Nonpriority creditor's name and mailing address KCP&L P O Box 219300 Kansas City, MO 64121 Date(s) debt was incurred __ Last 4 digits of account number <u>2580</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.379	Nonpriority creditor's name and mailing address Keith E. King P O Box 403 Pleasant Grove, UT 84062 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.380	Nonpriority creditor's name and mailing address Keith Pennington 770 East Main St #118 Lehi, UT 84043 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$137,615.64
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3.381	Nonpriority creditor's name and mailing address Kelly G. Bayles Vicky E. Bayles 280 N Long St. Green River, UT 84525 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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Debtor	Noah Corporation <small>Name</small>	Case number (if known)	19-23840
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3.382	Nonpriority creditor's name and mailing address Kenneth Wilson 57 Union St. E., Unit 705 Waterloo, Ontario N2J1B9 CANADA Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.383	Nonpriority creditor's name and mailing address Kent Harker P O Box 870233 West Bountiful, UT 84087 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$115,814.58
3.384	Nonpriority creditor's name and mailing address Kent S. Seymour and Donna G. Seymour Fam 24 Eagle Drive Novato, CA 94949 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.385	Nonpriority creditor's name and mailing address Keystone Publishing P O Box 71241 Salt Lake City, UT 84171 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,419.00
3.386	Nonpriority creditor's name and mailing address King & McLeary 240 West Main Street American Fork, UT 84003 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accounting Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$400.00
3.387	Nonpriority creditor's name and mailing address Kingston Water Dept. 900 Waterford Place Kingston, TN 37763 Date(s) debt was incurred _____ Last 4 digits of account number <u>4001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.388	Nonpriority creditor's name and mailing address Kingston Water Dept. 900 Waterford Place Kingston, TN 37763 Date(s) debt was incurred _____ Last 4 digits of account number <u>4101</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation Name	Case number (if known)	19-23840
--------	--------------------------	------------------------	----------

3.389	Nonpriority creditor's name and mailing address Kingston Water Dept. 900 Waterford Place Kingston, TN 37763 Date(s) debt was incurred ____ Last 4 digits of account number <u>4201</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.390	Nonpriority creditor's name and mailing address Kiran Holdings, LLC 10213 Blackstock Road Huntersville, NC 28078 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.391	Nonpriority creditor's name and mailing address Kiran Karumuri 10213 Blackstock Road Huntersville, NC 28078 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$102,000.00
<hr/>			
3.392	Nonpriority creditor's name and mailing address Kristen Lindsay P O Box 182 Orem, UT 84059 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.393	Nonpriority creditor's name and mailing address Kristin Matthews 4821 SW 35th Place Portland, OR 97221-3904 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$460,900.02
<hr/>			
3.394	Nonpriority creditor's name and mailing address Kyle P. Kennedy & MJK Trust Marilyn Kennedy, Trustee 2567 Holly Manor Dr. Falls Church, VA 22043 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.395	Nonpriority creditor's name and mailing address L&B Property Maintenance 102 Edenberry Ct Easley, SC 29642 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$609.00

Debtor	Noah Corporation Name	Case number (if known)	19-23840
--------	--------------------------	------------------------	----------

3.396	Nonpriority creditor's name and mailing address Lake County Department of Utilities 125 East Erie Street, Suite 7 Painesville, OH 44077 Date(s) debt was incurred ____ Last 4 digits of account number <u>0900</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.397	Nonpriority creditor's name and mailing address Lake Virginia Owners Association 2806 North Fifth Street, Ste. 403 Saint Augustine, FL 32084 Date(s) debt was incurred ____ Last 4 digits of account number <u>6</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,627.52
<hr/>			
3.398	Nonpriority creditor's name and mailing address Landcare P O Box 677220 Dallas, TX 75267 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$35,194.11
<hr/>			
3.399	Nonpriority creditor's name and mailing address Landscaping for Less P O Box 270 Canonsburg, PA 15317 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,385.00
<hr/>			
3.400	Nonpriority creditor's name and mailing address LaRayne Day 1563 East Spyglass Hill Dr. Draper, UT 84020 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$244,500.00
<hr/>			
3.401	Nonpriority creditor's name and mailing address Larry Bucciarelli, LLC Ellen Bucciarelli, LLC P O Box 622 Palisades, NY 10964 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.402	Nonpriority creditor's name and mailing address Larry J. Sturgeon 2008 Trust Larry J. Sturgeon, Trustee 7036 Via Valverde San Jose, CA 95135 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation Name	Case number (if known)	19-23840
--------	--------------------------	------------------------	----------

3.403	Nonpriority creditor's name and mailing address Laurens Electric Cooperville P O Box 967 Laurens, SC 29360 Date(s) debt was incurred ____ Last 4 digits of account number <u>9181</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.404	Nonpriority creditor's name and mailing address Lavender Creek LLC Attn: Valerie Sharp 5966 Dunegal Ct. Agoura Hills, CA 91301 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.405	Nonpriority creditor's name and mailing address Law Family Trust Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.406	Nonpriority creditor's name and mailing address Lawrence & Sherry Kelley 4840 Moss Creek LP #56 Murrells Inlet, SC 29576 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.407	Nonpriority creditor's name and mailing address Lawrence H. Talbot Russell M. Talbot 2708 Virginia Street Berkeley, CA 94709 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.408	Nonpriority creditor's name and mailing address Lazy Pines Enterprises, Inc. Attn: Ray Cowan 205 North Village Road Loudon, NH 03307 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.409	Nonpriority creditor's name and mailing address Ledgewood/Hillsborough Realty Group, LLC P O Box 543 Londonderry, NH 03053 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation Name	Case number (if known)	19-23840
--------	--------------------------	------------------------	----------

3.410	Nonpriority creditor's name and mailing address Lee & Lamont Realty Attn: Steve Lamont 40 West St. Ste 10 Vernon Rockville, CT 06066 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.411	Nonpriority creditor's name and mailing address Lee Revocable Trust Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.412	Nonpriority creditor's name and mailing address Leo A. Nicholes Cheryl D. Nicholes 1017 Willow Road Deer Lodge, MT 59722 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.413	Nonpriority creditor's name and mailing address Lesley Marquis P O Box 10627 Newbury, NH 03255 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.414	Nonpriority creditor's name and mailing address LG&E P O Box 9001960 Louisville, KY 40290 Date(s) debt was incurred ____ Last 4 digits of account number <u>1819</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.415	Nonpriority creditor's name and mailing address Liberty Utilities 75 Remittance Drive, Ste 1032 Chicago, IL 60675 Date(s) debt was incurred ____ Last 4 digits of account number <u>1574</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.416	Nonpriority creditor's name and mailing address Liem Quang Le P O Box 440123 Saint Louis, MO 63144 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation <small>Name</small>	Case number (if known)	19-23840
--------	---	------------------------	----------

3.417	Nonpriority creditor's name and mailing address Lincolnshire Corporate Center Assoc One Overlook Point, Ste 100 Lincolnshire, IL 60069 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,008.81
<hr/>			
3.418	Nonpriority creditor's name and mailing address Linda Barker 433 Rutgers Dr. Santa Maria, CA 93455 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$71,000.00
<hr/>			
3.419	Nonpriority creditor's name and mailing address Linda Tyler 435 Sierra Street Richland, WA 99354 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$168,100.01
<hr/>			
3.420	Nonpriority creditor's name and mailing address Lindon City 946 West Center Street Lindon, UT 84042 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.421	Nonpriority creditor's name and mailing address Lisa A. Storey Revocable Living Trust of 2013 90 Fern Way Chimacum, WA 98325 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.422	Nonpriority creditor's name and mailing address Lisa Perkowski Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$67,320.00
<hr/>			
3.423	Nonpriority creditor's name and mailing address Lonni G. Thorpe, L.C. P O Box 71187 Salt Lake City, UT 84171-0187 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation <small>Name</small>	Case number (if known)	19-23840
--------	---	------------------------	----------

3.424	Nonpriority creditor's name and mailing address Lorrie Stark 4542 Temple Shadows Dr Pleasant Grove, UT 84062-8669 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$243,019.06
3.425	Nonpriority creditor's name and mailing address Lou and Sharon Blakeslee 12502 NE 107th Ave Vancouver, WA 98662 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.426	Nonpriority creditor's name and mailing address Louise B. Burke 1991 Trust Attn: Louise Burke Lincoln, NH 03251 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.427	Nonpriority creditor's name and mailing address Louisville Water 550 South Third Street Louisville, KY 40202 Date(s) debt was incurred ____ Last 4 digits of account number <u>9642</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.428	Nonpriority creditor's name and mailing address Luann Properties, LLC Attn: Jeremy Hess 2795 Jodeco Dr. Jonesboro, GA 30236 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.429	Nonpriority creditor's name and mailing address Lucid Software 10355 South Jordan Gateway, Suite 300 South Jordan, UT 84095 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,006.25
3.430	Nonpriority creditor's name and mailing address Lundahl Cold Storage, L.L.C. 2005 N 600 W Ste C Logan, UT 84321 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation <small>Name</small>	Case number (if known)	19-23840
--------	---	------------------------	----------

3.431	Nonpriority creditor's name and mailing address Lyn Peterson 7602 S. Timberline Dr Salt Lake City, UT 84121 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$51,062.51
<hr/>			
3.432	Nonpriority creditor's name and mailing address Lynn E. Gregory 521 Oakmont Court Arnold, MD 21012 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.433	Nonpriority creditor's name and mailing address M&M Landscaping 6790 Hwy 304 Ten Mile, TN 37880 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.434	Nonpriority creditor's name and mailing address Madison Municipal Service P O Box 2997 Madison, WI 53701 Date(s) debt was incurred ____ Last 4 digits of account number <u>0254</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.435	Nonpriority creditor's name and mailing address Makena Herget 17 Cotton Farm Lane North Hampton, NH 03862 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$102,000.00
<hr/>			
3.436	Nonpriority creditor's name and mailing address Manchester Water Dept 281 Lincoln Sheet Manchester, NH 03103 Date(s) debt was incurred ____ Last 4 digits of account number <u>3972</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.437	Nonpriority creditor's name and mailing address Marcel Francis Lamaze 110 Fiske Street Pacific Palisades, CA 90272 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation <small>Name</small>	Case number (if known)	19-23840
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3.438	Nonpriority creditor's name and mailing address Marcia & Michael E. Kosar 2386 Vassar Dr. Boulder, CO 80305 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.439	Nonpriority creditor's name and mailing address Marcia Holmes 815 East 600 North Heber City, UT 84032 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$41,210.00
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3.440	Nonpriority creditor's name and mailing address Marcia Kosar 2386 Vassar Dr. Boulder, CO 80305 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.441	Nonpriority creditor's name and mailing address Margaret Ansara 29 Parsons Dr. Swampscott, MA 01907 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.442	Nonpriority creditor's name and mailing address Marianne B. Hendrickson 3001 N.E. 47th Ct, #313 Fort Lauderdale, FL 33308 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.443	Nonpriority creditor's name and mailing address Marie A. Aleman Revocable Trust 105 Emily Way West Hartford, CT 06107 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.444	Nonpriority creditor's name and mailing address Marilyn Bowser 9555 East Raintree Dr. #1045 Scottsdale, AZ 85260 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$121,000.00
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Debtor Noah Corporation Case number (if known) 19-23840
Name

3.445 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* \$101,000.00
Mark Dryjas
PO Box 533
Glen, NH 03838
☐ Contingent
☐ Unliquidated
☐ Disputed
Date(s) debt was incurred _____
Last 4 digits of account number _____
Basis for the claim: Unsecured loan
Is the claim subject to offset? ☒ No ☐ Yes

3.446 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* \$0.00
Mark E. & Susan M. Dunlap
PO Box 1288
Evergreen, CO 80437
☐ Contingent
☐ Unliquidated
☐ Disputed
Date(s) debt was incurred _____
Last 4 digits of account number _____
Basis for the claim: _____
Is the claim subject to offset? ☒ No ☐ Yes

3.447 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* \$0.00
Mark E. Tipton
Dawn L. Tipton
P O Box 3901
Rancho Santa Fe, CA 92067
☐ Contingent
☐ Unliquidated
☐ Disputed
Date(s) debt was incurred _____
Last 4 digits of account number _____
Basis for the claim: _____
Is the claim subject to offset? ☒ No ☐ Yes

3.448 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* \$51,770.85
Marlo Stradley
8932 South 3820 West
West Jordan, UT 84088
☐ Contingent
☐ Unliquidated
☐ Disputed
Date(s) debt was incurred _____
Last 4 digits of account number _____
Basis for the claim: Unsecured loan
Is the claim subject to offset? ☒ No ☐ Yes

3.449 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* \$0.00
Martha Lambert (Jordan)
302 Waverly Wood
Helena, AR 72342
☐ Contingent
☐ Unliquidated
☐ Disputed
Date(s) debt was incurred _____
Last 4 digits of account number _____
Basis for the claim: _____
Is the claim subject to offset? ☒ No ☐ Yes

3.450 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* \$0.00
Mary Beth Parke Trust

☐ Contingent
☐ Unliquidated
☐ Disputed
Date(s) debt was incurred _____
Last 4 digits of account number _____
Basis for the claim: _____
Is the claim subject to offset? ☒ No ☐ Yes

3.451 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* \$0.00
Mary J. O'Toole
2103 St. Johnsbury Rd.
Littleton, NH 03561
☐ Contingent
☐ Unliquidated
☐ Disputed
Date(s) debt was incurred _____
Last 4 digits of account number _____
Basis for the claim: _____
Is the claim subject to offset? ☒ No ☐ Yes

Debtor	Noah Corporation <small>Name</small>	Case number (if known)	19-23840
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3.452	Nonpriority creditor's name and mailing address Mary Jo Sleeper 109 Sommerfield Ave. South Burlington, VT 05403 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.453	Nonpriority creditor's name and mailing address Mary Louise Cashin 3008 The Strand Manhattan Beach, CA 90266 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$729,583.35
<hr/>			
3.454	Nonpriority creditor's name and mailing address Matthew Francom Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$153,000.00
<hr/>			
3.455	Nonpriority creditor's name and mailing address Maxon-Multiline, LLC Timothy & Prue Maxon P O Box 1495 Sorrento, FL 32776 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.456	Nonpriority creditor's name and mailing address McNaughtan Properties East, LLC Attn: Hi McNaughtan 1151 Pine Circle Heber City, UT 84032 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.457	Nonpriority creditor's name and mailing address MD Property Services 947 South 500 East Ste 210 American Fork, UT 84003 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,752.05
<hr/>			
3.458	Nonpriority creditor's name and mailing address MDB VENTURES LLC Attn: Mark D. Bouzianis 37 Bassett Lane Newfields, NH 03586 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor Name	Case number (if known)	19-23840
3.459 Nonpriority creditor's name and mailing address Melvin Hayes 5902 S Croft Ave. Los Angeles, CA 90056 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.460 Nonpriority creditor's name and mailing address Memorial RE Investments 1 Attn: Morgan Powell 777 West End Ave, 7A New York, NY 10025 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.461 Nonpriority creditor's name and mailing address Memphis Light Gas & Water P O Box 388 Memphis, TN 38145 Date(s) debt was incurred ____ Last 4 digits of account number <u>1829</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,049.00
3.462 Nonpriority creditor's name and mailing address Meredith Asher 1346 Lillian Ave. San Leandro, CA 94578 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.463 Nonpriority creditor's name and mailing address Merle L. Steinman Jr. 19822 28th Ave. West Lynnwood, WA 98036 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.464 Nonpriority creditor's name and mailing address Merny Schwartz & Isabel Schwartz 200 E. 19th St. Apt 3A Brooklyn, NY 11226 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.465 Nonpriority creditor's name and mailing address Metco Landscape 220 Rifle Street Aurora, CO 80011 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,658.00

Debtor	Noah Corporation Name	Case number (if known)	19-23840
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3.466	Nonpriority creditor's name and mailing address Metropolitan Utilities P O Box 3600 Omaha, NE 68103 Date(s) debt was incurred ____ Last 4 digits of account number <u>5631</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.467	Nonpriority creditor's name and mailing address Meyer Lab 2401 NW Jefferson Street Blue Springs, MO 64015 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,866.05
3.468	Nonpriority creditor's name and mailing address MG&E Madison Gas & Electric P O Box 1231 Madison, WI 53701 Date(s) debt was incurred ____ Last 4 digits of account number <u>3526</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.469	Nonpriority creditor's name and mailing address Michael & Verna Morgan 316 Gramayre Rd Coupeville, WA 98239 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$104,166.65
3.470	Nonpriority creditor's name and mailing address Michael C. Yarnell Rosanna L. Yarnell 208 High Brook Rd. Thornton, NH 03285 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.471	Nonpriority creditor's name and mailing address Michael D. Eddy P O Box 63 Franconia, NH 03580 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.472	Nonpriority creditor's name and mailing address Michael DeGiacomo and Linda DiGiacomo Revocable Trust 13985 Skyline Blvd. Oakland, CA 94619 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation <small>Name</small>	Case number (if known)	19-23840
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3.473	Nonpriority creditor's name and mailing address Michael E. Tate 1218 W. Cambridge St. Livingston, MT 59047 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.474	Nonpriority creditor's name and mailing address Mid American Energy P O Box 8020 Davenport, IA 52808 Date(s) debt was incurred ____ Last 4 digits of account number <u>7018</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$472.58
<hr/>			
3.475	Nonpriority creditor's name and mailing address Mike & Cheryl Hart 9A Lafayette Road North Hampton, NH 03862 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.476	Nonpriority creditor's name and mailing address Mike Watt Colorado Springs, CO Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.477	Nonpriority creditor's name and mailing address Minnie E. Scott 3931 Avenida Brisa Rancho Santa Fe, CA 92091 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.478	Nonpriority creditor's name and mailing address MLF Holdings, LLC Attn: Mark Fields 14175 W Indian School Rd. B-4 432 Goodyear, AZ 85395 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.479	Nonpriority creditor's name and mailing address MMC Land Management 1011 Foggy Hollow Road Gibsonia, PA 15044 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,002.03

Debtor	Noah Corporation <small>Name</small>	Case number (if known)	19-23840
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3.480	Nonpriority creditor's name and mailing address MMP Investments of Oregon, LLC Attn: Malik Pirani P O Box 28526 Portland, OR 97228 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.481	Nonpriority creditor's name and mailing address Monona Plumbing & Fire Protections 3126 Watford Way Madison, WI 53713 Date(s) debt was incurred ____ Last 4 digits of account number <u>NOAHS</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$608.00
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3.482	Nonpriority creditor's name and mailing address Mountain View Mobile Home Community, LLC 1550 NW Marjo Lane McMinnville, OR 97128 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.483	Nonpriority creditor's name and mailing address MSE IRA LLC Attn: Martin Edwards 2433 Saranac Court Glenview, IL 60026 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.484	Nonpriority creditor's name and mailing address MT. Rose Mortgage Co., Inc. Attn: Wayne Leavitt 2693 North 1200 East Lehi, UT 84043 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.485	Nonpriority creditor's name and mailing address Mullen Bridgewater Property Trust Attn: John & Melissa Mullen 31 Hagen Road Newton Center, MA 02459 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.486	Nonpriority creditor's name and mailing address Myron and Sherry Tippet 1 Briarwood Circle Pecos, TX 79772 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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Debtor	Noah Corporation Name	Case number (if known)	19-23840
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3.487	Nonpriority creditor's name and mailing address Nanci G. Cirone 69 Sunset Rock Road Lebanon, NH 03766 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.488	Nonpriority creditor's name and mailing address Nancy Neil 2640 West 15090 South Bluffdale, UT 84065 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$480,013.32
3.489	Nonpriority creditor's name and mailing address Naylor Insurance Agency 8494 South 700 East Sandy, UT 84070 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.490	Nonpriority creditor's name and mailing address Ned L. Miller and Cindy B. Miller Family 480 N. 400 E. Providence, UT 84332 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.491	Nonpriority creditor's name and mailing address Neffo T. Cappuccio Raffaele A. Cappuccio 100 Dale Street Revere, MA 02151 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.492	Nonpriority creditor's name and mailing address Nerber, Douglas 21 Fox Run Ln. South Burlington, VT 05403 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.493	Nonpriority creditor's name and mailing address New Direction, Inc FBO Nancy Pierce IRA 1070 W. Century Drive Suite 101 Louisville, CO 80027 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Name	Case number (if known)	19-23840
3.494	Nonpriority creditor's name and mailing address New Direction, Inc FBO Patrica Wells IRA 203 Blue Sky Court Columbia, MO 65203 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.495	Nonpriority creditor's name and mailing address New Mexico Gas Co P O Box 27885 Albuquerque, NM 87125 Date(s) debt was incurred ____ Last 4 digits of account number <u>2260</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$72.94
3.496	Nonpriority creditor's name and mailing address Newburyport Press, Inc. Attn: David Brown 44 Cottage Road Newbury, MA 01951 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.497	Nonpriority creditor's name and mailing address Nicholas Redd 12547 S Stonebridge Cir. Draper, UT 84020 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.498	Nonpriority creditor's name and mailing address Nicor Gas P O Box 5407 Carol Stream, IL 60197 Date(s) debt was incurred ____ Last 4 digits of account number <u>4055</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$347.12
3.499	Nonpriority creditor's name and mailing address Nina D. Johannessen Living Trust u/d/t 01/29/2018 577 Partridge Lake Road Littleton, NH 03580 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.500	Nonpriority creditor's name and mailing address Noah Rockwell LLC Attn: Mary Seto 334 Broome St, Apt 7 New York, NY 10002 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation <small>Name</small>	Case number (if known)	19-23840
--------	---	------------------------	----------

3.501	Nonpriority creditor's name and mailing address Noah's Ark Restaurant 2400 Ingersoll Avenue Des Moines, IA 50312 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.502	Nonpriority creditor's name and mailing address Noreen DeAngeles 2215 El Arbolita Drive Glendale, CA 91208 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.503	Nonpriority creditor's name and mailing address Norman & Lillian Lee 245 Via Havarre Merritt Island, FL 32953 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.504	Nonpriority creditor's name and mailing address Norman A. Lee & Lillian C. Lee 1775 Larchmont Court Merritt Island, FL 32952 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.505	Nonpriority creditor's name and mailing address Norman L. Merritt, Jr. Armenay Faye Merritt 240 Central Park South, #11D New York, NY 10019 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.506	Nonpriority creditor's name and mailing address Norman Lee Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$153,000.00
<hr/>			
3.507	Nonpriority creditor's name and mailing address North Shore Gas P O Box 2968 Milwaukee, WI 53201 Date(s) debt was incurred ____ Last 4 digits of account number <u>0001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation Name	Case number (if known)	19-23840
--------	--------------------------	------------------------	----------

3.508	Nonpriority creditor's name and mailing address Nyemaster Goode 700 Walnut Ste 1600 Des Moines, IA 50309 Date(s) debt was incurred ____ Last 4 digits of account number <u>8892</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Legal Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,897.50
3.509	Nonpriority creditor's name and mailing address Oak Hill Management, Inc. PO Box 405 Saxtons River, VT 05154 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.510	Nonpriority creditor's name and mailing address Oak Ridge (ORUD) 120 South Jefferson Circle Oak Ridge, TN 37830 Date(s) debt was incurred ____ Last 4 digits of account number <u>1001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$18.97
3.511	Nonpriority creditor's name and mailing address OGE Electric P O Box 24990 Oklahoma City, OK 73124 Date(s) debt was incurred ____ Last 4 digits of account number <u>8028</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.512	Nonpriority creditor's name and mailing address Oklahoma Natural Gas P O Box 219296 Kansas City, MO 64121 Date(s) debt was incurred ____ Last 4 digits of account number <u>8582</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$252.17
3.513	Nonpriority creditor's name and mailing address Oklahoma Natural Gas P O Box 219296 Kansas City, MO 64121 Date(s) debt was incurred ____ Last 4 digits of account number <u>4609</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.514	Nonpriority creditor's name and mailing address Olson Toon Landscaping, Inc. 3570 Pioneer Road Verona, WI 53593 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,348.08

Debtor	Noah Corporation Name	Case number (if known)	19-23840
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3.515	Nonpriority creditor's name and mailing address OPPD Omaha Public Power P O Box 3995 Omaha, NE 68103 Date(s) debt was incurred ____ Last 4 digits of account number <u>5057</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.516	Nonpriority creditor's name and mailing address Orwell Natural Gas P O Box 74008599 Chicago, IL 60674 Date(s) debt was incurred ____ Last 4 digits of account number <u>1361</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.517	Nonpriority creditor's name and mailing address Otis P O Box 73579 Chicago, IL 60673 Date(s) debt was incurred ____ Last 4 digits of account number <u>8883</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$747.30
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3.518	Nonpriority creditor's name and mailing address Ozhen & Vartan Barsegyan 210 North Glenoaks Blvd., Ste. A Burbank, CA 91502 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$207,916.65
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3.519	Nonpriority creditor's name and mailing address P & S Faulk Trust 279 E. 2600 N. Lehi, UT 84043 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.520	Nonpriority creditor's name and mailing address P&E Building Services, LLC 224 East Douglas Ave Ste 331 Wichita, KS 67202 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,867.00
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3.521	Nonpriority creditor's name and mailing address Pamela J. Troyer 55 Sargent Street Winthrop, MA 02152 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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Debtor	Noah Corporation Name	Case number (if known)	19-23840
--------	--------------------------	------------------------	----------

3.522	Nonpriority creditor's name and mailing address Pamela Ramsey Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$102,000.00
3.523	Nonpriority creditor's name and mailing address Parivash Mazhari 103 Avalon Court Canton, GA 30115 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.524	Nonpriority creditor's name and mailing address Parke Family Revocable Trust Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.525	Nonpriority creditor's name and mailing address Patricia Davis 601 East 4055 South Murray, UT 84107 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$20,562.52
3.526	Nonpriority creditor's name and mailing address Paul Banks and Eileen Gabriel 65 W Castor Place Staten Island, NY 10312 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.527	Nonpriority creditor's name and mailing address Paul E. Frascoia Living Trust 6770 Indian Creek Drive, Apt PH-G Miami Beach, FL 33141 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.528	Nonpriority creditor's name and mailing address Paul J. Cattin and Vickie Lee Cattin Co-Trustees of the Cattin Trust 4359 Toyon Cir. La Verne, CA 91750 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation Name	Case number (if known)	19-23840
--------	--------------------------	------------------------	----------

3.529	Nonpriority creditor's name and mailing address Paul S. Humphreys 14 Albin Road Bow, NH 03304 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.530	Nonpriority creditor's name and mailing address Penn Power P O Box 3687 Akron, OH 44309 Date(s) debt was incurred ____ Last 4 digits of account number <u>6269</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.531	Nonpriority creditor's name and mailing address Pennsylvania American Water P O Box 371412 Pittsburgh, PA 15250 Date(s) debt was incurred ____ Last 4 digits of account number <u>5421</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$389.90
3.532	Nonpriority creditor's name and mailing address Peoples P O Box 644760 Pittsburgh, PA 15264 Date(s) debt was incurred ____ Last 4 digits of account number <u>2724</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.533	Nonpriority creditor's name and mailing address Perimeter Park Owners Association 130 E Randolph St. Ste 2100 Chicago, IL 60601 Date(s) debt was incurred ____ Last 4 digits of account number <u>mo01</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,129.10
3.534	Nonpriority creditor's name and mailing address Peter Cromarty Anonsia Station PO Box 237154 New York, NY 10023 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.535	Nonpriority creditor's name and mailing address Peter J. Maney 153 Rainbow Dr. Livingston, TX 77399 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation <small>Name</small>	Case number (if known)	19-23840
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3.536	Nonpriority creditor's name and mailing address Peter Marcalus 19636 SE 220th Street Renton, WA 98058 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$67,320.00
<hr/>			
3.537	Nonpriority creditor's name and mailing address Peter Maricich 19636 SE 220th Street Renton, WA 98058 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$130,525.00
<hr/>			
3.538	Nonpriority creditor's name and mailing address Petersen Lake Hill Ranch, LP Attn: Dave Petersen P O Box 558 Preston, ID 83263 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.539	Nonpriority creditor's name and mailing address Philip A. Chenevert 28 Park Terrace Dr. Saint Augustine, FL 32080 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.540	Nonpriority creditor's name and mailing address Phillip S. Cherry 555 N. 1100 W. West Bountiful, UT 84087 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.541	Nonpriority creditor's name and mailing address Piedmont Natural Gas P O Box 1246 Charlotte, NC 28201 Date(s) debt was incurred ____ Last 4 digits of account number <u>5001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.542	Nonpriority creditor's name and mailing address Piedmont Natural Gas P O Box 1246 Charlotte, NC 28201 Date(s) debt was incurred ____ Last 4 digits of account number <u>6001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation <small>Name</small>	Case number (if known)	19-23840
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3.543	Nonpriority creditor's name and mailing address Piraino Enterprises, LLC Attn: John and Jan Piraino 6014 N Pointe Place Woodland Hills, CA 91367 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.544	Nonpriority creditor's name and mailing address PNM P O Box 27900 Albuquerque, NM 87125 Date(s) debt was incurred ____ Last 4 digits of account number <u>2431</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$677.94
3.545	Nonpriority creditor's name and mailing address Premiere Landscape Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.546	Nonpriority creditor's name and mailing address Preventative Pest Control 14881 Concorde Park Dr. Bluffdale, UT 84065 Date(s) debt was incurred ____ Last 4 digits of account number <u>7417</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,378.97
3.547	Nonpriority creditor's name and mailing address Productions Management, LLC Attn: Thomas Fiore 2278 East 1st Street Brooklyn, NY 11223 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$102,000.00
3.548	Nonpriority creditor's name and mailing address Professional Systems Technology 390 West 6500 South Murray, UT 84107 Date(s) debt was incurred ____ Last 4 digits of account number <u>4068</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$615.43
3.549	Nonpriority creditor's name and mailing address Provident Trust Group, LLC FBO Richard Dautre-Jones IRA 8880 W. Sunset Rd., Ste 250 Las Vegas, NV 89148 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation <small>Name</small>	Case number (if known)	19-23840
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3.550	Nonpriority creditor's name and mailing address Provident Trust Group, LLC FBO: John D. Sumner IRA 8880 W Sunset Rd #250 Las Vegas, NV 89148 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.551	Nonpriority creditor's name and mailing address Provident Trust Group, LLC FBO: Krishnan S. Anand IRA 8880 W Sunset Rd, Ste 250 Las Vegas, NV 89148 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.552	Nonpriority creditor's name and mailing address Provident Trust Group, LLC FBO: Krishnan S. Anand IRA 6898 S. Captiva Cove Salt Lake City, UT 84121 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.553	Nonpriority creditor's name and mailing address Provident Trust Group, LLC FBO: Rosario Greco IRA #200264 8880 W. Sunset Rd. Ste 240 Las Vegas, NV 89148 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.554	Nonpriority creditor's name and mailing address Provident Trust Group, LLC FBO: Scott M. Bean IRA 8880 W. Sunset Rd., Ste 250 Las Vegas, NV 89148 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.555	Nonpriority creditor's name and mailing address PSNC Energy P O Box 100256 Columbia, SC 29202 Date(s) debt was incurred _____ Last 4 digits of account number <u>3855</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.556	Nonpriority creditor's name and mailing address Public Work & Utilities P O Box 2922 Wichita, KS 67201 Date(s) debt was incurred _____ Last 4 digits of account number <u>6661</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$147.97

Debtor	Name	Case number (if known)	19-23840
3.557	Nonpriority creditor's name and mailing address Pueblo Mechanical & Controls, LLC 6771 East Outlook Drive Tucson, AZ 85756 Date(s) debt was incurred ____ Last 4 digits of account number <u>a001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,268.48
3.558	Nonpriority creditor's name and mailing address Quail Springs Office Park 14000 Quail Springs Parkway #225 Oklahoma City, OK 73134 Date(s) debt was incurred ____ Last 4 digits of account number <u>6938</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.559	Nonpriority creditor's name and mailing address Quail Springs Parkway Property LLC Attn: Rich Raffals P O Box 504 Woodacre, CA 94973 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.560	Nonpriority creditor's name and mailing address Quality Creative Landscaping 6104 Old Quarry Road Birmingham, AL 35235 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,840.00
3.561	Nonpriority creditor's name and mailing address R & H Paul, Inc. Attn: Neil B. Walker 19372 Avenue 218 Lindsay, CA 93247 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.562	Nonpriority creditor's name and mailing address R & J Steck Investments 303 Nechatel Drive Draper, UT 84020 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.563	Nonpriority creditor's name and mailing address R. B. Professional Properties, L.P. Attn: Tim McLean 38760 Sky Canyon Dr. Suite C Murrieta, CA 92563 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Name	Case number (if known)	19-23840
3.564	Nonpriority creditor's name and mailing address R. P. Associates, LLC Attn: Kris May P O Box 242 Bonsall, CA 92003 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.565	Nonpriority creditor's name and mailing address Rake Properties, LLC 39 Hillcrest Road Ogden Dunes, IN 46368 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.566	Nonpriority creditor's name and mailing address Ralph J. Herbert 79 Highland Avenue Northfield, VT 05663 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.567	Nonpriority creditor's name and mailing address Ralph J. Herbert 1337 Garvin Hill Road Greensboro, VT 05841 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.568	Nonpriority creditor's name and mailing address Ralph J. Reeder Margaret E. Reeder P O Box 1807 Medford, OR 97501 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.569	Nonpriority creditor's name and mailing address Randall Phillip Storm Lisa Jane Storm 54321 130th Street Byars, OK 74831 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.570	Nonpriority creditor's name and mailing address Real Mint LLC Attn: Mary Ann Holda 768 Harris Point Dr. Virginia Beach, VA 23455 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$204,000.00

Debtor	Name	Case number (if known)	19-23840
3.571	Nonpriority creditor's name and mailing address Red Pepper Software 2436 West 700 South, Suite 202 Pleasant Grove, UT 84062 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,050.00
3.572	Nonpriority creditor's name and mailing address REG Real Estate & Investment, LLC Attn: Linda Morkrid 3906 Pasadena Dr Boise, ID 83705 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.573	Nonpriority creditor's name and mailing address Reliable Refrigeration Services, Inc. 913 E Juanita Ave, Suite 1 Mesa, AZ 85204 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$340.19
3.574	Nonpriority creditor's name and mailing address Renewal Properties, LLC 6077 Brasswood Row La Jolla, CA 92037 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.575	Nonpriority creditor's name and mailing address Republic Services P O Box 9001099 Louisville, KY 40290 Date(s) debt was incurred ____ Last 4 digits of account number <u>2408</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,702.98
3.576	Nonpriority creditor's name and mailing address Revere Beach Parkway Realty Trust Attn: Richard B. Adams 154 Hemlock Drive Gilmanton, NH 03237 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.577	Nonpriority creditor's name and mailing address Reynolds Landscaping & Tree Service 8756 Wheeler Ct. Mentor, OH 44060 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,540.80

Debtor	Noah Corporation <small>Name</small>	Case number (if known)	19-23840
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3.578	Nonpriority creditor's name and mailing address Richard A. Menard 149 Lane Road Chester, NH 03036 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.579	Nonpriority creditor's name and mailing address Richard and Patricia Miller Living Trust 9205 Shari Dr. Fairfax, VA 22032 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.580	Nonpriority creditor's name and mailing address Richard J. Mikita Living Trust 19246 SE 46th Place Issaquah, WA 98027 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.581	Nonpriority creditor's name and mailing address Richard J. Steck Allison Keri Steck 13564 Clovis Ct. Riverton, UT 84065 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.582	Nonpriority creditor's name and mailing address Richard Kauflin 3080 22nd Street Boulder, CO 80304 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.583	Nonpriority creditor's name and mailing address Richard Kiernan 15 Woodbury Ln. Bedford, NH 03110 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.584	Nonpriority creditor's name and mailing address Richmore Ventures 1896 Motel Brookside Attn: Denise Richer 113 Dockray Street Wakefield, RI 02879 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation <small>Name</small>	Case number (if known)	19-23840
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3.585	Nonpriority creditor's name and mailing address Riverbend Industrial Partners, LTD Attn: Bill Rickett 500 Throckmorton Street Unit 3203 Fort Worth, TX 76102 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.586	Nonpriority creditor's name and mailing address Robert & Peggy Shawver 143 South 1200 West Blackfoot, ID 83221 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.587	Nonpriority creditor's name and mailing address Robert Baker 98 West 550 North Vineyard, UT 84059 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$362,921.84
3.588	Nonpriority creditor's name and mailing address Robert D. & Donna L. Druck 205 East Posey Road Airville, PA 17302 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.589	Nonpriority creditor's name and mailing address Robert E. & Wendy J. Thueson 904 South Greenwood Shoshone, ID 83352 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.590	Nonpriority creditor's name and mailing address Robert F. Kauflin Joann B. Kauflin 37 Hillside Lane Telluride, CO 81435 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.591	Nonpriority creditor's name and mailing address Robert Gorney Cathy Gorney 42091 Black Oak Dr. Three Rivers, CA 93271 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation Name	Case number (if known)	19-23840
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3.592	Nonpriority creditor's name and mailing address Robert J. Berti 2015 Revocable Trust P O Box 576 Rumney, NH 03266 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.593	Nonpriority creditor's name and mailing address Robert R. and Rita Sue Carter 27020 S State Rt C Freeman, MO 64746 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.594	Nonpriority creditor's name and mailing address Robert T. Boaks Revocable Trust 7065 Bottlebrush Lane Naples, FL 34109 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.595	Nonpriority creditor's name and mailing address Robyn Openshaw 8086 Courtyard Loop Park City, UT 84098 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$684,307.72
3.596	Nonpriority creditor's name and mailing address Rockwell Debt Free Properties Inc. 8494 South 700 East Ste. 200 Sandy, UT 84070 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,616,000.00
3.597	Nonpriority creditor's name and mailing address Rockwood P O Box 108 Rockwood, TN 37854 Date(s) debt was incurred ____ Last 4 digits of account number <u>9073</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.598	Nonpriority creditor's name and mailing address Rocky Mountain Power P O Box 26000 Portland, OR 97256 Date(s) debt was incurred ____ Last 4 digits of account number <u>0013</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,016.34

Debtor	Name	Case number (if known)	19-23840
3.599	Nonpriority creditor's name and mailing address Rocky Mountain Power P O Box 26000 Portland, OR 97256 Date(s) debt was incurred ____ Last 4 digits of account number <u>0012</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.600	Nonpriority creditor's name and mailing address Roger O. Boisse Joan Boisse 514 Nassau Road Marco Island, FL 34145 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.601	Nonpriority creditor's name and mailing address Rolf F. Hertenstein Emily M. Walker P O Box 1244 Lyons, CO 80540 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.602	Nonpriority creditor's name and mailing address Ronald D. Hubbard and Emily Ann Hubbard Family Trust 3278 Via Ribera Escondido, CA 92029-7448 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.603	Nonpriority creditor's name and mailing address Rosa DiTucci 82 Arlington Road Woburn, MA 01801 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.604	Nonpriority creditor's name and mailing address Ross R. Greco Linda M. Greco 2170 County Down Ln. Apple Valley, CA 92308 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$101,000.00
3.605	Nonpriority creditor's name and mailing address Russell A. Fisichella 1255 Vallejo St. San Francisco, CA 94109 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation Name	Case number (if known)	19-23840
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3.606	Nonpriority creditor's name and mailing address Russell E. Hertrich Revocable Trust 80 Pont Street, Unit 5 Salem, NH 03079 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.607	Nonpriority creditor's name and mailing address Ruth Ann Gladwell (David Gladwell) 3159 North 1075 East North Ogden, UT 84414 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.608	Nonpriority creditor's name and mailing address Ryan V. Andreasen Alena C. Andreasen 2114 South 500 East Kaysville, UT 84037 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.609	Nonpriority creditor's name and mailing address SAMGA Corporation Attn: Raymond Blondeau 77 Church St. Goffstown, NH 03045 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.610	Nonpriority creditor's name and mailing address San Antonio Water System P O Box 2990 San Antonio, TX 78299 Date(s) debt was incurred ____ Last 4 digits of account number <u>0001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,150.99
<hr/>			
3.611	Nonpriority creditor's name and mailing address San Antonio Water System P O Box 2990 San Antonio, TX 78299 Date(s) debt was incurred ____ Last 4 digits of account number <u>0001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,323.92
<hr/>			
3.612	Nonpriority creditor's name and mailing address Sandifer 229 S Ellis Wichita, KS 67211 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$96.75

Debtor	Noah Corporation <small>Name</small>	Case number (if known)	19-23840
--------	---	------------------------	----------

3.613	Nonpriority creditor's name and mailing address Sandra C. Harris 43 Ridge Ave Claremont, NH 03743 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.614	Nonpriority creditor's name and mailing address Sandra K. Hardy 16625 W Stoneridge Ct Surprise, AZ 85387 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.615	Nonpriority creditor's name and mailing address Sanford Roberts Helaine B. Roberts 100 Shepherds Cove Road, Unit G201 Kittery, ME 03904 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.616	Nonpriority creditor's name and mailing address SCG Mechanical 8610 Wallisville Road Houston, TX 77029 Date(s) debt was incurred ____ Last 4 digits of account number <u>0001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,062.01
<hr/>			
3.617	Nonpriority creditor's name and mailing address Scott Hooser 2503 West 13105 South Riverton, UT 84065 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$27,291.63
<hr/>			
3.618	Nonpriority creditor's name and mailing address Scott Jensen 127 West 5878 South Murray, UT 84107 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$112,000.00
<hr/>			
3.619	Nonpriority creditor's name and mailing address Seminole County Water & Sewer Utility P O Box 958442 Lake Mary, FL 32795 Date(s) debt was incurred ____ Last 4 digits of account number <u>0086</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation Name	Case number (if known)	19-23840
--------	--------------------------	------------------------	----------

3.620	Nonpriority creditor's name and mailing address Sentinel Sales and Management Attn: Kathleen Lopez 85 E Main St American Fork, UT 84003 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.621	Nonpriority creditor's name and mailing address SERP, LLC Attn: Susan Reilly 17 Oakmont Dr. Rancho Mirage, CA 92270 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.622	Nonpriority creditor's name and mailing address Seth M. Boynton 231 Bloomington Ln. Wilmington, NC 28411 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.623	Nonpriority creditor's name and mailing address Shashikant D. Naik Nilmbari Naik 481 Grenadine Way Hercules, CA 94547 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.624	Nonpriority creditor's name and mailing address Shauna Thompson 331 Pioneer Ave Sandy, UT 84070 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$25,177.08
3.625	Nonpriority creditor's name and mailing address Shawn & Terri Lund 10235 S Vilas Dr. Sandy, UT 84092 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$188,700.00
3.626	Nonpriority creditor's name and mailing address Shawn T. Hopkins 2668 Loomis Drive San Jose, CA 95121 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation <small>Name</small>	Case number (if known)	19-23840
--------	---	------------------------	----------

3.627	Nonpriority creditor's name and mailing address Sherman Dallas Simpson Living Trust Attn: John Simpson 3895 Old Vineyard Road Apt. 311 Winston Salem, NC 27104 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.628	Nonpriority creditor's name and mailing address Sherrie East Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$997,000.00
3.629	Nonpriority creditor's name and mailing address Sidney Walch P O Box 830 Sandy, UT 84091 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,312.50
3.630	Nonpriority creditor's name and mailing address Smith, Bryan & Carol 4396 Hollow Road Nibley, UT 84321 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.631	Nonpriority creditor's name and mailing address Sommer's Mobile Leasing 1800 Lorain Blvd Elyria, OH 44035 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$117.25
3.632	Nonpriority creditor's name and mailing address South Valley Sewer P O Box 498 Pleasant Grove, UT 84062 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.633	Nonpriority creditor's name and mailing address Southwind Commercial Prop. Association 5101 Wheelis Drive, Suite 320 Memphis, TN 38117 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation <small>Name</small>	Case number (if known)	19-23840
--------	---	------------------------	----------

3.634	Nonpriority creditor's name and mailing address Spectrum P O Box 1060 Carol Stream, IL 60132 Date(s) debt was incurred ____ Last 4 digits of account number <u>5501</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Internet</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.635	Nonpriority creditor's name and mailing address Spectrum P O Box 70872 Charlotte, NC 28272 Date(s) debt was incurred ____ Last 4 digits of account number <u>7801</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Internet</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$124.97
<hr/>			
3.636	Nonpriority creditor's name and mailing address Spectrum P O Box 742614 Cincinnati, OH 45274 Date(s) debt was incurred ____ Last 4 digits of account number <u>1067</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Internet</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,202.98
<hr/>			
3.637	Nonpriority creditor's name and mailing address Spectrum Business (Fort Worth) Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Phone/Internet</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.638	Nonpriority creditor's name and mailing address Spectrum Business/Time Warner Cable (PA) Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.639	Nonpriority creditor's name and mailing address SRP Electric P O Box 80062 Prescott, AZ 86304 Date(s) debt was incurred ____ Last 4 digits of account number <u>5003</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,625.72
<hr/>			
3.640	Nonpriority creditor's name and mailing address Star Treatment Valet 4102 Waterstone Missouri City, TX 77459 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,380.00

Debtor	Noah Corporation <small>Name</small>	Case number (if known)	19-23840
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3.641	Nonpriority creditor's name and mailing address Stearns Family Limited Partnership Steven Abernathy, General Partner 485 Park Ave. New York, NY 10022 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.642	Nonpriority creditor's name and mailing address Stephen A. Lamont Trust 40 West St. Ste 10 Vernon Rockville, CT 06066 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.643	Nonpriority creditor's name and mailing address Stephen Bert Lewis & Marilyn Kay Lewis Family Trust 3902 Ardmore Dr. San Diego, CA 92111 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.644	Nonpriority creditor's name and mailing address Stephen E. Wilson Muriel S. Wilson 1762 Lawrence Cr. South Jordan, UT 84095 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.645	Nonpriority creditor's name and mailing address Stephen H. Charbonneau Sandra J. Charbonneau 10583 Horizon Lane E SE Port Orchard, WA 98367 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.646	Nonpriority creditor's name and mailing address Stephen Lewis Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$102,000.00
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3.647	Nonpriority creditor's name and mailing address Steve & Jennifer Headley 710 NW 319th Street Ridgfield, WA 98642 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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Debtor	Noah Corporation Name	Case number (if known)	19-23840
--------	--------------------------	------------------------	----------

3.648	Nonpriority creditor's name and mailing address Steve Livingston 161 East 1910 South Orem, UT 84058 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$139,469.00
<hr/>			
3.649	Nonpriority creditor's name and mailing address Steve Trumbo 1599 North 1550 East Provo, UT 84604 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.650	Nonpriority creditor's name and mailing address Steve Wilson 4024 S Parkview Dr Salt Lake City, UT 84124 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$30,850.00
<hr/>			
3.651	Nonpriority creditor's name and mailing address Steven B. & Cynthia H. Patterson 27 Taylor Brook Ln. Derry, NH 03038 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.652	Nonpriority creditor's name and mailing address Steven R. & Debra A. LaRoza 23383 Currier Drive Tracy, CA 95304 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.653	Nonpriority creditor's name and mailing address Steven R. LaRoza Debra A. LaRoza 482 Littleton Road Whitefield, NH 03598 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.654	Nonpriority creditor's name and mailing address Steven Speer 633 Post Oak Dr Coppell, TX 75019 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$99,186.60

Debtor	Noah Corporation <small>Name</small>	Case number (if known)	19-23840
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3.655	Nonpriority creditor's name and mailing address Stratus Building Solutions P O Box 211339 Denver, CO 80221 Date(s) debt was incurred ____ Last 4 digits of account number <u>8822</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,385.65
<hr/>			
3.656	Nonpriority creditor's name and mailing address Stuart & Barbara Mesnik Family Trust 17063 Dearborn St. Northridge, CA 91325 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.657	Nonpriority creditor's name and mailing address Summit Hearing & AC 8101 Shaffer Pkwy, Suite 105 Littleton, CO 81027 Date(s) debt was incurred ____ Last 4 digits of account number <u>5098</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,320.00
<hr/>			
3.658	Nonpriority creditor's name and mailing address Sunbelt Rentals P O Box 409211 Atlanta, GA 30384 Date(s) debt was incurred ____ Last 4 digits of account number <u>5665</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$25,533.00
<hr/>			
3.659	Nonpriority creditor's name and mailing address Sunwest Trust Company as custodian for the Sandra L. Walsh IRA 1298 Kings Bottom Dr. Fort Mill, SC 29715 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.660	Nonpriority creditor's name and mailing address Sunwest Trust Company as custodian for the Thomas C. Kelly IRA 3240 D Juan Tabo NE Albuquerque, NM 87111 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.661	Nonpriority creditor's name and mailing address Sunwest Trust George Foss IRA #201106787 PO Box 36371 Albuquerque, NM 87176 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Name	Case number (if known)	19-23840
3.662	Nonpriority creditor's name and mailing address Sunwest Trust, Inc. FBO Phillip S Cherry 10600 Menaul Blvd NE Albuquerque, NM 87112 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.663	Nonpriority creditor's name and mailing address Sunwest Trust, Norman Lee IRA #901308879 PO Box 36371 Albuquerque, NM 87176 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.664	Nonpriority creditor's name and mailing address Susan Peterson Provo, UT Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.665	Nonpriority creditor's name and mailing address T-Squared Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.666	Nonpriority creditor's name and mailing address Tanner 36 South State Street, Ste 600 Salt Lake City, UT 84111 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,055.71
3.667	Nonpriority creditor's name and mailing address Tatone 2005 Family Trust 488 Sunset Hill Road Sugar Hill, NH 03586 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.668	Nonpriority creditor's name and mailing address Taylor Boaks 1064 Manor Lake Drive B-102 Naples, FL 34110 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation <small>Name</small>	Case number (if known)	19-23840
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3.669	Nonpriority creditor's name and mailing address Ted H. Sellman 3808 Painted Pony Rd. El Sobrante, CA 94803 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.670	Nonpriority creditor's name and mailing address Terry L. Schrum Kathleen H. Schrum 22 Blockhouse Court Ormond Beach, FL 32174 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.671	Nonpriority creditor's name and mailing address Texas Green P O Box 393 Pleasanton, TX 78064 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.672	Nonpriority creditor's name and mailing address The Andrew R. Courteau Jr. Revocable Tru 280 Houde Road Eliot, ME 03903 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.673	Nonpriority creditor's name and mailing address The Anthony Perricone Separate Property 5625 Shasta Daisy Trail San Diego, CA 92130 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.674	Nonpriority creditor's name and mailing address The Anthony R. Massahos Revocable Trust 19 Farrwood Road Windham, NH 03087 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.675	Nonpriority creditor's name and mailing address The Arellano Investment Trust Attn: Christine Showalter P O Box 1947 Bonita, CA 91908 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation Name	Case number (if known)	19-23840
--------	--------------------------	------------------------	----------

3.676	Nonpriority creditor's name and mailing address The Arthur and Carol Roso Jnt Revocable 301 Wind Poppy Way Waunakee, WI 53597 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.677	Nonpriority creditor's name and mailing address The Arthur and Carol Roso Jnt Revocable 8540 Greenway Blvd. Apt 117 Middleton, WI 53562 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.678	Nonpriority creditor's name and mailing address The Cal and Gayle Jorgensen Family Trust 3663 Bountiful Blvd. Bountiful, UT 84010 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.679	Nonpriority creditor's name and mailing address The Cattin Trust 4359 Toyon Dir. La Verne, CA 91750 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.680	Nonpriority creditor's name and mailing address The Christina S. Porter Revocable Trust 544 Mount Holyoke Avenue Pacific Palisades, CA 90272 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.681	Nonpriority creditor's name and mailing address The City of OKC P O Box 26570 Oklahoma City, OK 73126 Date(s) debt was incurred ____ Last 4 digits of account number <u>6090</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$602.30
3.682	Nonpriority creditor's name and mailing address The Colegrove Family Trust Norm & Virginia 711 Burma Road Fallbrook, CA 92028 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation <small>Name</small>	Case number (if known)	19-23840
--------	---	------------------------	----------

3.683	Nonpriority creditor's name and mailing address The David and Victoria Green Family Trus 40508 154th Street East Lancaster, CA 93535 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.684	Nonpriority creditor's name and mailing address The David and Zora Stephenson Living Tru 5004 W. 5500 S. Hooper, UT 84315 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.685	Nonpriority creditor's name and mailing address The Dobies Family Trust Victor & Cynthia 17718 Vineyard Ln. Poway, CA 92064 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.686	Nonpriority creditor's name and mailing address The Donald Paul Olshove and Gwendolyn Rae Olshove Family Trust P O Box 81 Clovis, CA 93613 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.687	Nonpriority creditor's name and mailing address The Eldon R. and Carol M. Eakin Family T 242 Pine Needle Lane Bigfork, MT 59911 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.688	Nonpriority creditor's name and mailing address The Ernest G. Sunderland Personal Trust 7856 S. Willowcrest Cr. Salt Lake City, UT 84121 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.689	Nonpriority creditor's name and mailing address The Fox Family Trust Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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Debtor	Noah Corporation Name	Case number (if known)	19-23840
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3.690	Nonpriority creditor's name and mailing address The Frank R. Pierce Jr. Exempt Trust 5334 Bayside Court Cape Coral, FL 33904 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.691	Nonpriority creditor's name and mailing address The Fred Jacob Living Trust 12340 Rochester Ave. Apt 214 Los Angeles, CA 90025 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.692	Nonpriority creditor's name and mailing address The G. Scott Coleman Trust 410 Cobblestone Drive Providence, UT 84332 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.693	Nonpriority creditor's name and mailing address The Gaylon T. Peters Trust 409 Vanderkloot Dr. Osprey, FL 34229 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.694	Nonpriority creditor's name and mailing address The George E. Foss III Revocable Trust 96125 Marsh Lakes Drive Fernandina Beach, FL 32034 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.695	Nonpriority creditor's name and mailing address The Heather Ann Harrington Revocable Tru 3319 N. 700 E. Lehi, UT 84043 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.696	Nonpriority creditor's name and mailing address The Hendrix Family Living Trust Terry & Judith P O Box 957 Manzanita, OR 97130 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation Name	Case number (if known)	19-23840
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3.697	Nonpriority creditor's name and mailing address The James J. Rossi Trust 5040 York Blvd. Los Angeles, CA 90042 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.698	Nonpriority creditor's name and mailing address The Jennifer C. Deitchman Trust 11745 N. 125th St. Scottsdale, AZ 85259 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.699	Nonpriority creditor's name and mailing address The Jim & Marlene Plate 2000 Trust P O Box 710 Weiser, ID 83672 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.700	Nonpriority creditor's name and mailing address The Joan B. Segall Trust 1914 North 80th Street Seattle, WA 98103 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.701	Nonpriority creditor's name and mailing address The Jonathan and Emily Weiss Living Trus 14306 NW 52nd Ave. Vancouver, WA 98685 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.702	Nonpriority creditor's name and mailing address The Kathy S. Calhoun Trust 2650 Lake Shore Drive #1901 Riviera Beach, FL 33404 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.703	Nonpriority creditor's name and mailing address The Larry E. Mull Revocable Living Trust P O Box 8309 Morganton, NC 28680 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Name	Case number (if known)	19-23840
3.704	Nonpriority creditor's name and mailing address The Lawrence C. Kelley Jr. Revocable Tru Sherry Kelley 18 Perkins Road Rutland, VT 05701-4614 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.705	Nonpriority creditor's name and mailing address The Lawrence Trust Attn: Harvey & Madelon Lawrence 14201 Hayden Rd, Suite A-2 Scottsdale, AZ 85260 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.706	Nonpriority creditor's name and mailing address The Lewis & Retta Chappell Trust 460 Pole Dr. Heber City, UT 84032 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.707	Nonpriority creditor's name and mailing address The Linda Renfroe Family Trust 58 Via Santa Maria San Clemente, CA 92672 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.708	Nonpriority creditor's name and mailing address The Living Trust of Thomas C & Linda M K 1617 Woodland Greenes Blvd. Springboro, OH 45066 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.709	Nonpriority creditor's name and mailing address The Lowell S. & Kathleen S. Peterson Int Attn: Kathleen Peterson 3643 Elkridge Trail Eden, UT 84310 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.710	Nonpriority creditor's name and mailing address The Lynn & Patti Anderson Joint Rev. Tru 9432 Dunbar Cove South Jordan, UT 84065 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation Name	Case number (if known)	19-23840
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3.711	Nonpriority creditor's name and mailing address The Margaret G. Hansen Trust 1847 West 500 North West Point, UT 84015 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.712	Nonpriority creditor's name and mailing address The Margaret Olena Robins Family Trust 2408 W Country Bend Dr South Jordan, UT 84095-9483 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.713	Nonpriority creditor's name and mailing address The Marjorie J. Stanton Irrevocable Trus 81 Appleton Street, Apt. 4 Quincy, MA 02171 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.714	Nonpriority creditor's name and mailing address The Mathews Revocable Trust Attn: Fred & Darlene 13565 Wilson Ct. Sonora, CA 95370 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.715	Nonpriority creditor's name and mailing address The Moyce 1989 Family Trust Attn: Andrew Moyce 1163 Ashmount Ave. Piedmont, CA 94610 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.716	Nonpriority creditor's name and mailing address The Naylor Family Trust Attn: Dan & Diane Naylor 2595 E. 9900 S. Sandy, UT 84092 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.717	Nonpriority creditor's name and mailing address The Neerja B. Reddy Revocable Trust 10953 Stallion Way Rancho Cucamonga, CA 91737 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Name	Case number (if known)	19-23840
3.718	Nonpriority creditor's name and mailing address The Ng Trust dated May 7, 1990 Ng, Beverly 1905 Alisar Avenue Monterey Park, CA 91755 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.719	Nonpriority creditor's name and mailing address The NJW Family Trust Attn: Neil & Jacquelyn Walker 19372 Avenue 218 Lindsay, CA 93247 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.720	Nonpriority creditor's name and mailing address The Norman A. Lee Revocable Trust 1775 Larchmont Court Merritt Island, FL 32952 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.721	Nonpriority creditor's name and mailing address The Normand H. Ramsey Revocable Trust P O Box 306 New Castle, NH 03854 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.722	Nonpriority creditor's name and mailing address The Ogden Family Trust Attn: Steve & Toni 9461 S. Peaceful View Way South Jordan, UT 84095 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.723	Nonpriority creditor's name and mailing address The Patterson Family Trust Attn: Steve & Cindy 27 Taylor Brook Ln Derry, NH 03038 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.724	Nonpriority creditor's name and mailing address The Richard & Patricia Miller Living Tru 9205 Shari Dr. Fairfax, VA 22032 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation <small>Name</small>	Case number (if known)	19-23840
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3.725	Nonpriority creditor's name and mailing address The Richard & Susan Harder 1997 Trust 1716 Gouldin Road Oakland, CA 94611 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.726	Nonpriority creditor's name and mailing address The Robert Fitzgerald Family Trust 610 East 60 South Preston, ID 83263 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.727	Nonpriority creditor's name and mailing address The Russell Family Living Trust Dick R. 735 Darien Way San Francisco, CA 94127 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.728	Nonpriority creditor's name and mailing address The Saxton Family Trust Attn: Catheryn Saxton 9625 South 285 East Sandy, UT 84070 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.729	Nonpriority creditor's name and mailing address The Schupack Family Trust Attn: Mel & Barbara P O Box 546 Walpole, NH 03608 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.730	Nonpriority creditor's name and mailing address The Shawn and Teri Lund 1998 Family Trus 10235 S Vilas Dr. Sandy, UT 84092 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.731	Nonpriority creditor's name and mailing address The Sherman Dallas Simpson Living Trust Attn: John Simpson 3895 Old Vineyard Road Apt. 311 Winston Salem, NC 27104 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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Debtor	Noah Corporation Name	Case number (if known)	19-23840
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3.732	Nonpriority creditor's name and mailing address The Spiritus Revocable Trust 9 DOMANI Drive Newport Coast, CA 92657 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.733	Nonpriority creditor's name and mailing address The Steven G. Nienabler Revocable Trust 5430 N 107th St Kansas City, KS 66109 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.734	Nonpriority creditor's name and mailing address The Thomas Family Trust Attn: Dan & Diane Naylor 2595 E. 9900 S. Sandy, UT 84092 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.735	Nonpriority creditor's name and mailing address The Tierney Revocable Living Trust 37 Lakeview Terrace Burlington, VT 05401 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.736	Nonpriority creditor's name and mailing address The W. Mark McKoy Irrevocable Trust of 2 7328 Chelsea Court University Park, FL 34201 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.737	Nonpriority creditor's name and mailing address The Water Co. (Galveston County WCID#1) P O Box 307 Dickinson, TX 77539 Date(s) debt was incurred ____ Last 4 digits of account number <u>4001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.738	Nonpriority creditor's name and mailing address The William G. & Merilyn O'Brien Family 31500 Grape Street, Suite 3-166 Lake Elsinore, CA 92532-9709 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation <small>Name</small>	Case number (if known)	19-23840
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3.739	Nonpriority creditor's name and mailing address The William H. Zelff, Jr. Revocable Tru 1150 Kittiwake Drive Venice, FL 34285-6614 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.740	Nonpriority creditor's name and mailing address The Witzel Living Trust Richard & Colleen Witzel 90115 Lakeview Dr. Eugene, OR 97402 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.741	Nonpriority creditor's name and mailing address The Zahner Living Trust Frank & Shirley 331 N. Camaloch Drive Camano Island, WA 98282 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.742	Nonpriority creditor's name and mailing address Theodore E. Keith & Dena A. Keith 2641 Elmore Mountain Road Elmore, VT 05661 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.743	Nonpriority creditor's name and mailing address Thomas B. Tarbet 3573 S. Capulet Way Meridian, ID 83642 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.744	Nonpriority creditor's name and mailing address Thomas E. Funk 30 Many Waters Road Bristol, VT 05443 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$102,000.00
3.745	Nonpriority creditor's name and mailing address Thomas Fiore 2278 East One Street Brooklyn, NY 11223 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation Name	Case number (if known)	19-23840
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3.746	Nonpriority creditor's name and mailing address Thomas R. Stevens PO Box 2197 Elko, NV 89803 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.747	Nonpriority creditor's name and mailing address Thompson & Knight 1722 Routh Street Ste 1500 Dallas, TX 75201 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Legal Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,699.00
3.748	Nonpriority creditor's name and mailing address Tibty, Inc. Attn: Katherine Ruel 801 Briny Ave., #1401 Pompano Beach, FL 33062 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.749	Nonpriority creditor's name and mailing address TIC Owners - Albuquerque 4591 Vista Fuente Road NW Albuquerque, NM 87114 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent, Property Taxes</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$84,315.00
3.750	Nonpriority creditor's name and mailing address TIC Owners - Auburn Hills 3391 Cross Creek Parkway Auburn Hills, MI 48326 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent, Property Taxes</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$268,167.00
3.751	Nonpriority creditor's name and mailing address TIC Owners - Bedford 379 South River Road Bedford, NH 03110 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent, Property Taxes</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$81,974.00
3.752	Nonpriority creditor's name and mailing address TIC Owners - Blue Ash 10627 Techwoods Circle Blue Ash, OH 45242 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent, Property Taxes</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$105,525.00

Debtor	Noah Corporation <small>Name</small>	Case number (if known)	19-23840
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3.753	Nonpriority creditor's name and mailing address TIC Owners - Chandler 2100 E Yeager Drive Chandler, AZ 85286 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent, Property Tax</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$92,144.00
<hr/>			
3.754	Nonpriority creditor's name and mailing address TIC Owners - Charlotte 2421 Yorkmont Rd Charlotte, NC 28217 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent, Property Taxes</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$70,400.00
<hr/>			
3.755	Nonpriority creditor's name and mailing address TIC Owners - Chesapeake 625 Independence Pkwy Chesapeake, VA 23320 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent, Property Taxes</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$69,318.00
<hr/>			
3.756	Nonpriority creditor's name and mailing address TIC Owners - Cranberry 10020 Pendleton Way Cranberry Twp, PA 16066 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent, Property Taxes</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$171,328.00
<hr/>			
3.757	Nonpriority creditor's name and mailing address TIC Owners - Des Moines 1805 90th Street West Des Moines, IA 50266 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent, Property Taxes</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$201,459.00
<hr/>			
3.758	Nonpriority creditor's name and mailing address TIC Owners - Dickinson 3920 Gulf Fwy S Dickinson, TX 77539 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent, Property Taxes</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$113,691.00
<hr/>			
3.759	Nonpriority creditor's name and mailing address TIC Owners - Fairview 351 Southwind Ln Fairview, TX 75069 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent, Property Taxes</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$161,865.00

Debtor	Noah Corporation Name	Case number (if known)	19-23840
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3.760	Nonpriority creditor's name and mailing address TIC Owners - Fort Worth 4301 Fossil Creek Blvd Fort Worth, TX 76137 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent, Property Taxes</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$156,193.00
3.761	Nonpriority creditor's name and mailing address TIC Owners - Greenville 1301 Brookfield Blvd Greenville, SC 29607 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent, Property Taxes</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$141,726.00
3.762	Nonpriority creditor's name and mailing address TIC Owners - High Point 4130 Mendenhall Oaks Pkwy High Point, NC 27265 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent, Property Taxes</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$76,120.00
3.763	Nonpriority creditor's name and mailing address TIC Owners - Hoover 2501 International Park Pl Hoover, AL 35216 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent, Property Taxes</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$125,302.00
3.764	Nonpriority creditor's name and mailing address TIC Owners - Kay 12402 Merchants Way Katy, TX 77449 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent, Property Taxes</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$75,855.00
3.765	Nonpriority creditor's name and mailing address TIC Owners - Kingston 1200 Ladd Landing Blvd Kingston, TN 37763 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent, Property Taxes</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$77,811.00
3.766	Nonpriority creditor's name and mailing address TIC Owners - Lake Mary 720 Currency Cir Lake Mary, FL 32746 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent, Property Taxes</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$136,190.00

Debtor	Noah Corporation <small>Name</small>	Case number (if known)	19-23840
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3.767	Nonpriority creditor's name and mailing address TIC Owners - Las Colinas 6101 E Campus Circle Dr Irving, TX 75063 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent, Property Taxes</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$111,554.00
3.768	Nonpriority creditor's name and mailing address TIC Owners - Lincolnshire 200 Barclay Blvd Lincolnshire, IL 60069 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent, Property Taxes</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$60,684.00
3.769	Nonpriority creditor's name and mailing address TIC Owners - Little Rock 21 Rahling Cir Little Rock, AR 72223 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent, Property Taxes</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$60,684.00
3.770	Nonpriority creditor's name and mailing address TIC Owners - Louisville 12451 Plantside Dr Louisville, KY 40299 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent, Property Taxes</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$72,144.00
3.771	Nonpriority creditor's name and mailing address TIC Owners - Madison 5020 American Family Dr Madison, WI 53718 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent, Property Taxes</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$166,494.00
3.772	Nonpriority creditor's name and mailing address TIC Owners - Memphis 3243 Players Club Circle Memphis, TN 38125 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent, Property Taxes</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$112,786.00
3.773	Nonpriority creditor's name and mailing address TIC Owners - Mentor 8200 Norton Parkway Mentor, OH 44060 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent, Property Taxes</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$169,723.00

Debtor	Noah Corporation <small>Name</small>	Case number (if known)	19-23840
--------	---	------------------------	----------

3.774	Nonpriority creditor's name and mailing address TIC Owners - Morrisville 5180 Paramount Pkwy Morrisville, NC 27560 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent, Property Taxes</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$111,000.00
<hr/>			
3.775	Nonpriority creditor's name and mailing address TIC Owners - Naperville 119 Shuman Blvd Naperville, IL 60563 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent, Property Taxes</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$67,617.00
<hr/>			
3.776	Nonpriority creditor's name and mailing address TIC Owners - New Albany 175 East Main Street New Albany, OH 43054 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent, Property Taxes</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$240,533.00
<hr/>			
3.777	Nonpriority creditor's name and mailing address TIC Owners - Oklahoma City 14017 Quail Springs Pkwy Oklahoma City, OK 73134 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent, Property Taxes</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$176,754.00
<hr/>			
3.778	Nonpriority creditor's name and mailing address TIC Owners - Omaha 17121 Marcy St Omaha, NE 68118 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent, Property Taxes</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$92,486.00
<hr/>			
3.779	Nonpriority creditor's name and mailing address TIC Owners - Overland Park 7341 W 133rd Street Overland Park, KS 66213 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent, Property Taxes</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$216,773.00
<hr/>			
3.780	Nonpriority creditor's name and mailing address TIC Owners - Plano 5280 Towne Square Drive Plano, TX 75024 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent, Property Taxes</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$258,771.00

Debtor	Noah Corporation <small>Name</small>	Case number (if known)	19-23840
--------	---	------------------------	----------

3.781	Nonpriority creditor's name and mailing address TIC Owners - Richardson 2251 N Greenville Ave Richardson, TX 75082 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent, Property Taxes</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$159,518.00
3.782	Nonpriority creditor's name and mailing address TIC Owners - San Antonio 18918 Ridgewood Pkwy San Antonio, TX 78259 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent, Property Taxes</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$63,798.00
3.783	Nonpriority creditor's name and mailing address TIC Owners - South Jordan 322 West 11000 South South Jordan, UT 84070 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent, Property Taxes</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$164,121.00
3.784	Nonpriority creditor's name and mailing address TIC Owners - Southfield 26100 Northwestern Highway Southfield, MI 48076 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent, Property Taxes</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$112,580.00
3.785	Nonpriority creditor's name and mailing address TIC Owners - Southpointe 26100 Northwestern Highway Southfield, MI 48076 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent, Property Taxes</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$77,395.00
3.786	Nonpriority creditor's name and mailing address TIC Owners - Sugarland 16555 Creek Bend Dr Sugar Land, TX 77478 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent, Property Taxes</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$119,956.00
3.787	Nonpriority creditor's name and mailing address TIC Owners - Tulsa 12710 East State Farm Blvd. Tulsa, OK 74146 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent, Property Taxes</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$127,085.00

Debtor	Noah Corporation Name	Case number (if known)	19-23840
--------	--------------------------	------------------------	----------

3.788	Nonpriority creditor's name and mailing address TIC Owners - Utah County 1976 West 700 North Lindon, UT 84042 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent, Property Taxes</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$103,762.00
3.789	Nonpriority creditor's name and mailing address TIC Owners - Westminster 11885 Bradburn Blvd Westminster, CO 80031 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent, Property Taxes</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$482,009.00
3.790	Nonpriority creditor's name and mailing address TIC Owners - Wichita 1550 N Lindberg Cir Wichita, KS 67206 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent, Property Taxes</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$139,556.00
3.791	Nonpriority creditor's name and mailing address Tiger Oak Media, Inc. Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$860.00
3.792	Nonpriority creditor's name and mailing address Timberland Landscape 2005 Pontiac Road, Ste D Auburn Hills, MI 48326 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,440.00
3.793	Nonpriority creditor's name and mailing address Todd J. Dorius Jody L. Dorius 4842 West 8820 South West Jordan, UT 84081 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.794	Nonpriority creditor's name and mailing address Todd R. Stiernagle Ltd Solo K 1654 Stanbridge Ave. Saint Paul, MN 55113 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation <small>Name</small>	Case number (if known)	19-23840
--------	---	------------------------	----------

3.795	Nonpriority creditor's name and mailing address Toot, Inc. Attn: Ed Geither 8501 West 113th Street Overland Park, KS 66210-2439 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.796	Nonpriority creditor's name and mailing address Town and Campus, Inc. Attn: Jesse & June Gangwer 105 Perkins Road Madbury, NH 03823 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.797	Nonpriority creditor's name and mailing address Town of Bedford 24 North Amherst Rd. Bedford, NH 03110 Date(s) debt was incurred ____ Last 4 digits of account number <u>3972</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.798	Nonpriority creditor's name and mailing address Town of Cary P O Box 71090 Charlotte, NC 28272 Date(s) debt was incurred ____ Last 4 digits of account number <u>8798</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.799	Nonpriority creditor's name and mailing address Town of Fairview 372 Town Place Fairview, TX 75069 Date(s) debt was incurred ____ Last 4 digits of account number <u>0001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$444.05
<hr/>			
3.800	Nonpriority creditor's name and mailing address Tpark Four, LLC 2801 North Thanksgiving Way, Ste 100 Lehi, UT 84043 Date(s) debt was incurred ____ Last 4 digits of account number <u>0254</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Office Rent</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$45,971.95
<hr/>			
3.801	Nonpriority creditor's name and mailing address Tracy Adame 9239 Ridge Post San Antonio, TX 78250 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation Name	Case number (if known)	19-23840
--------	--------------------------	------------------------	----------

3.802	Nonpriority creditor's name and mailing address Traditions Landscape P O Box 387 New Albany, OH 43054 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,533.81
3.803	Nonpriority creditor's name and mailing address TXU P O Box 650638 Dallas, TX 75265 Date(s) debt was incurred ____ Last 4 digits of account number <u>4489</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$951.97
3.804	Nonpriority creditor's name and mailing address TXU P O Box 650638 Dallas, TX 75265 Date(s) debt was incurred ____ Last 4 digits of account number <u>6508</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,444.69
3.805	Nonpriority creditor's name and mailing address TXU P O Box 650638 Dallas, TX 75265 Date(s) debt was incurred ____ Last 4 digits of account number <u>2880</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.806	Nonpriority creditor's name and mailing address TXU P O Box 650638 Dallas, TX 75265 Date(s) debt was incurred ____ Last 4 digits of account number <u>6874</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.807	Nonpriority creditor's name and mailing address TXU P O Box 650638 Dallas, TX 75265 Date(s) debt was incurred ____ Last 4 digits of account number <u>2706</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.808	Nonpriority creditor's name and mailing address TXU P O Box 650638 Dallas, TX 75265 Date(s) debt was incurred ____ Last 4 digits of account number <u>6882</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation <small>Name</small>	Case number (if known)	19-23840
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3.809	Nonpriority creditor's name and mailing address TXU P O Box 650638 Dallas, TX 75265 Date(s) debt was incurred ____ Last 4 digits of account number <u>8361</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.810	Nonpriority creditor's name and mailing address TXU P O Box 650638 Dallas, TX 75265 Date(s) debt was incurred ____ Last 4 digits of account number <u>4510</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,415.84
<hr/>			
3.811	Nonpriority creditor's name and mailing address Tytanium 4, LLC Attn: Tom Coleman 4210 Prairiewest Dr. Champaign, IL 61822 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.812	Nonpriority creditor's name and mailing address UHS Premium Billing P O Box 94017 Palatine, IL 60094 Date(s) debt was incurred ____ Last 4 digits of account number <u>7429</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.813	Nonpriority creditor's name and mailing address Van & Wendy Hadlock 1547 South 1220 West Vernal, UT 84078 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.814	Nonpriority creditor's name and mailing address Van Jen Family Trust Attn: James & Kathryn 1757 Bittersweet Hill Vista, CA 92084 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.815	Nonpriority creditor's name and mailing address Verne E. Folkmann Revocable Trust 2169 Terra Lane Coralville, IA 52241 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation Name	Case number (if known)	19-23840
--------	--------------------------	------------------------	----------

3.816	Nonpriority creditor's name and mailing address Victor Grijalva 449 Avalon Lane Coppell, TX 75019 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,570,000.00
3.817	Nonpriority creditor's name and mailing address Victor M. Szurgot, Jr, Trustee Lind J. Szurgot, Trustee 1590 Spyglass Circle Chesterton, IN 46304 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.818	Nonpriority creditor's name and mailing address Victoria M. Cathcart 2527 Adams Ave. San Diego, CA 92116-1309 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.819	Nonpriority creditor's name and mailing address Village of Lincolnshire P O Box 1303 Bedford Park, IL 60499 Date(s) debt was incurred ____ Last 4 digits of account number <u>0000</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.820	Nonpriority creditor's name and mailing address Vincent DiNapoli PO Box 78 Ludlow, VT 05149 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.821	Nonpriority creditor's name and mailing address Virginia Natural Gas P O Box 5409 Carol Stream, IL 60197 Date(s) debt was incurred ____ Last 4 digits of account number <u>4309</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$26.54
3.822	Nonpriority creditor's name and mailing address Voynovich Ventures LTD. 34-06 33rd St. Astoria, NY 11106 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Name	Case number (if known)	19-23840
3.823	Nonpriority creditor's name and mailing address W&CG Investments LLC Attn: Bill Gibbs 702 Timberstone Ln. Friendswood, TX 77546 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.824	Nonpriority creditor's name and mailing address Waldinger Corporation P O Box 1612 Des Moines, IA 50306 Date(s) debt was incurred _____ Last 4 digits of account number <u>6397</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,633.09
3.825	Nonpriority creditor's name and mailing address Waste Connections of KS, Inc. 2745 North Ohio Wichita, KS 67219 Date(s) debt was incurred _____ Last 4 digits of account number <u>7902</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.826	Nonpriority creditor's name and mailing address Waste Management P O Box 930580 Atlanta, GA 31193 Date(s) debt was incurred _____ Last 4 digits of account number <u>Noah Corporation</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,505.67
3.827	Nonpriority creditor's name and mailing address Water One of Johnson County P O Box 808007 Kansas City, MO 64180 Date(s) debt was incurred _____ Last 4 digits of account number <u>6151</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.828	Nonpriority creditor's name and mailing address Weddingpages, LLC, dba The Knot 11106 Mockinggird Drive Omaha, NE 68137 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.829	Nonpriority creditor's name and mailing address WeddingWire, Inc. Two Wisconsin Circle, 3rd Floor Chevy Chase, MD 20815 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation <small>Name</small>	Case number (if known)	19-23840
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3.830	Nonpriority creditor's name and mailing address West Des Moines Water Works P O Box 402002 Des Moines, IA 50940 Date(s) debt was incurred _____ Last 4 digits of account number <u>0430</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.831	Nonpriority creditor's name and mailing address West Des Moines Water Works P O Box 402002 Des Moines, IA 50940 Date(s) debt was incurred _____ Last 4 digits of account number <u>2149</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.832	Nonpriority creditor's name and mailing address West Penn Power P O Box 3687 Akron, OH 44309 Date(s) debt was incurred _____ Last 4 digits of account number <u>4035</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.833	Nonpriority creditor's name and mailing address Westar Energy P O Box 419353 Kansas City, MO 64141 Date(s) debt was incurred _____ Last 4 digits of account number <u>6188</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,200.98
3.834	Nonpriority creditor's name and mailing address Weston MUD P O Box 3150 Dept. 30413 Houston, TX 77253 Date(s) debt was incurred _____ Last 4 digits of account number <u>4001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$86.29
3.835	Nonpriority creditor's name and mailing address Weston MUD P O Box 3150 Dept. 30413 Houston, TX 77253 Date(s) debt was incurred _____ Last 4 digits of account number <u>4101</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.836	Nonpriority creditor's name and mailing address William B. Maloney PO Box 131 Alder, MT 59710 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Noah Corporation <small>Name</small>	Case number (if known)	19-23840
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3.837	Nonpriority creditor's name and mailing address William Barth and Linda Barth 934 S Tremaine Avenue Los Angeles, CA 90019 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.838	Nonpriority creditor's name and mailing address William Garrick Wright and Susan M. Wright Trust 4874 S. State St. Murray, UT 84107 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.839	Nonpriority creditor's name and mailing address William Hassel Schjelderup 3755 Evelyn Drive Salt Lake City, UT 84124 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$306,375.00
3.840	Nonpriority creditor's name and mailing address William J. Bowser 7970 Glenwild Dr. Park City, UT 84098 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Unsecured loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$228,150.00
3.841	Nonpriority creditor's name and mailing address William R. Wells & Christy L. Wells 82962 Joseph Highway Joseph, OR 97846 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.842	Nonpriority creditor's name and mailing address Windward Investments, LLC PO Box 1120 Center Harbor, NH 03226 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.843	Nonpriority creditor's name and mailing address Xcel Energy P O Box 9477 Minneapolis, MN 55484 Date(s) debt was incurred ____ Last 4 digits of account number <u>7794</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor Noah Corporation Case number (if known) 19-23840
Name

3.844 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* \$0.00
Xenocorp, LLC
Attn: John Wolz
820 S. Monoaco Parkway Ste. 305
Denver, CO 80224
☐ Contingent
☐ Unliquidated
☐ Disputed
Date(s) debt was incurred:
Basis for the claim:
Last 4 digits of account number:
Is the claim subject to offset? ☒ No ☐ Yes

3.845 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* \$1,371.37
Young Electric, Inc.
3046 East 31st Street
Wichita, KS 67216
☐ Contingent
☐ Unliquidated
☐ Disputed
Date(s) debt was incurred:
Basis for the claim:
Last 4 digits of account number: NOAEVEO
Is the claim subject to offset? ☒ No ☐ Yes

3.846 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* \$0.00
YUKYOM REALTY, LLC
Attn: Helen Dellheim
5612 Mirrorlight Pl
Columbia, MD 21045
☐ Contingent
☐ Unliquidated
☐ Disputed
Date(s) debt was incurred:
Basis for the claim:
Last 4 digits of account number:
Is the claim subject to offset? ☒ No ☐ Yes

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address

On which line in Part 1 or Part 2 is the related creditor (if any) listed?

Last 4 digits of account number, if any

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2
Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ 448,013.53
5b. +	\$ 33,977,689.03
5c.	\$ 34,425,702.56

Fill in this information to identify the case:

Debtor name Noah Corporation

United States Bankruptcy Court for the: DISTRICT OF UTAH

Case number (if known) 19-23840

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal*

Property

(Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest 4/30/2014 - Noah Operations Lake Mary FL, LLC - 720 Currency Circle, Lake Mary, FL 32746

State the term remaining

List the contract number of any government contract

NC Lake Mary 639, LLC
c/o Guggenheim Retail Real Estate Prtnrs
3000 Internet Blvd, Suite 570
Frisco, TX 75034

2.2. State what the contract or lease is for and the nature of the debtor's interest 1/16/2014 - Noah Operations Lincolnshire Illinois, LLC - 200 Barclay Boulevard, Lincolnshire, IL 60069

State the term remaining

List the contract number of any government contract

NC Lincolnshire 624, LLC
c/o Guggenheim Retail Real Estate Prtnrs
3000 Internet Blvd, Suite 570
Frisco, TX 75034

2.3. State what the contract or lease is for and the nature of the debtor's interest 4/28/2014 - Noah Operations Little Rock AR, LLC - 25 Rahling Circle, Little Rock, AR 72223

State the term remaining

List the contract number of any government contract

NC Little Rock 642, LLC
c/o Guggenheim Retail Real Estate Prtnrs
3000 Internet Blvd, Suite 570
Frisco, TX 75034

2.4. State what the contract or lease is for and the nature of the debtor's interest 7/28/2014 - Noah Operations Louisville KY, LLC - 12451 Plantside Dr, Louisville, KY 40299

State the term remaining

List the contract number of any government contract

NC Louisville 657, LLC
c/o Guggenheim Retail Real Estate Prtnrs
3000 Internet Blvd, Suite 570
Frisco, TX 75034

Debtor 1 Noah Corporation

Case number (if known) 19-23840

First Name

Middle Name

Last Name

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2.5. State what the contract or lease is for and the nature of the debtor's interest 7/28/2014 - Noah Operations Mentor OH, LLC - 82000 Norton Parkway, Mentor, OH 44060

State the term remaining

List the contract number of any government contract

NC Mentor 636, LLC
c/o Guggenheim Retail Real Estate Prtnrs
3000 Internet Blvd, Suite 570
Frisco, TX 75034

2.6. State what the contract or lease is for and the nature of the debtor's interest 6/27/2014 - Noah Operations Morrisville NC, LLC - 5180 Paramount Parkway, Morrisville, NC 27560

State the term remaining

List the contract number of any government contract

NC Morrisville 644, LLC
c/o Guggenheim Retail Real Estate Prtnrs
3000 Internet Blvd, Suite 570
Frisco, TX 75034

2.7. State what the contract or lease is for and the nature of the debtor's interest 1/6/2014 - Noah Operations Naperville IL, LLC - 103 Shuman Boulevard, Naperville, IL 60563

State the term remaining

List the contract number of any government contract

NC Naperville 623, LLC
c/o Guggenheim Retail Real Estate Prtnrs
3000 Internet Blvd, Suite 570
Frisco, TX 75034

2.8. State what the contract or lease is for and the nature of the debtor's interest 1/6/2014 - Noah Operations Oklahoma City OK, LLC -14017 Quail Springs Pkwy, Oklahoma City, OK 73134

State the term remaining

List the contract number of any government contract

NC Oklahoma City 633, LLC
c/o Guggenheim Retail Real Estate Prtnrs
3000 Internet Blvd, Suite 570
Frisco, TX 75034

2.9. State what the contract or lease is for and the nature of the debtor's interest 8/25/2014 - Noah Operations Overland Park KS, LLC - 7341 W 133rd St, Overland Park, KS 66213

State the term remaining

List the contract number of any government contract

NC Overland Park 632, LLC
c/o Guggenheim Retail Real Estate Prtnrs
3000 Internet Blvd, Suite 570
Frisco, TX 75034

Debtor 1 Noah Corporation

Case number (if known) 19-23840

First Name

Middle Name

Last Name

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2.10. State what the contract or lease is for and the nature of the debtor's interest

12/23/2013 - Noah Operations San Antonio Texas, LLC - 18918 Ridgewood Pkwy, San Antonio, TX 78259

State the term remaining

List the contract number of any government contract

NC San Antonio 628, LLC
c/o Guggenheim Retail Real Estate Prtnrs
3000 Internet Blvd, Suite 570
Frisco, TX 75034

2.11. State what the contract or lease is for and the nature of the debtor's interest

6/22/2014 - Noah Operations Tulsa OK, LLC - 12710 East State Farm Blvd., Tulsa, OK 74146

State the term remaining

List the contract number of any government contract

NC Tulsa 627, LLC
c/o Guggenheim Retail Real Estate Prtnrs
3000 Internet Blvd, Suite 570
Frisco, TX 75034

2.12. State what the contract or lease is for and the nature of the debtor's interest

3/1/2015 - Noah Operations Albuquerque NM, LLC - 4591 Vista Fuente Rd NW, Albuquerque, NM 87114

State the term remaining

List the contract number of any government contract

Rockwell Albuquerque, LLC
8494 South 700 East, Suite 200
Sandy, UT 84070

2.13. State what the contract or lease is for and the nature of the debtor's interest

10/1/2014 - Noah Operations Auburn Hills MI, LLC - 3391 Cross Creek Parkway Auburn Hills, MI 48326

State the term remaining

List the contract number of any government contract

Rockwell Auburn Hills, LLC
8494 South 700 East, Suite 200
Sandy, UT 84070

2.14. State what the contract or lease is for and the nature of the debtor's interest

5/1/2017 - Noah Operations Bedford NH, LLC - 379 South River Rd, Bedford, NH 03110

State the term remaining

List the contract number of any government contract

Rockwell Bedford, LLC
8494 South 700 East, Suite 200
Sandy, UT 84070

Debtor 1 Noah Corporation

Case number (if known) 19-23840

First Name

Middle Name

Last Name

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2.15. State what the contract or lease is for and the nature of the debtor's interest

6/1/2016 - Noah Operations Hoover AL, LLC - 2501 International Park Pl, Hoover, AL 35216

State the term remaining

List the contract number of any government contract

Rockwell Birmingham, LLC
8494 South 700 East, Suite 200
Sandy, UT 84070

2.16. State what the contract or lease is for and the nature of the debtor's interest

6/1/2016 - Noah Operations Chesapeake VA, LLC - 625 Independence Pkwy, Chesapeake, VA 23320

State the term remaining

List the contract number of any government contract

Rockwell Chesapeake, LLC
8494 South 700 East, Suite 200
Sandy, UT 84070

2.17. State what the contract or lease is for and the nature of the debtor's interest

2/1/2018 - Noah Operations Blue Ash OH, LLC - 10627 Techwood Circle, Blue Ash, OH 45252

State the term remaining

List the contract number of any government contract

Rockwell Cincinnati, LLC
8494 South 700 East, Suite 200
Sandy, UT 84070

2.18. State what the contract or lease is for and the nature of the debtor's interest

7/15/2018 - Noah Corporation - 4805 Acorn Drive, Independence, OH 44131

State the term remaining

List the contract number of any government contract

Rockwell Cleveland, LLC
8494 South 700 East, Suite 200
Sandy, UT 84070

2.19. State what the contract or lease is for and the nature of the debtor's interest

8/1/2016 - Noah Operations Cranberry PA, LLC - 10020 Pendleton Way, Cranberry Township, PA 16066

State the term remaining

List the contract number of any government contract

Rockwell Cranberry, LLC
8494 South 700 East, Suite 200
Sandy, UT 84070

Debtor 1 Noah Corporation

Case number (if known) 19-23840

First Name

Middle Name

Last Name

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2.20. State what the contract or lease is for and the nature of the debtor's interest 12/1/2018 - Noah Corporation - 5280 Towne Square Drive, Plano, TX 74024

State the term remaining

List the contract number of any government contract

Rockwell Debt Free Properties Inc.
8494 South 700 East Ste. 200
Sandy, UT 84070

2.21. State what the contract or lease is for and the nature of the debtor's interest 6/1/2017 - Noah Operations Louisville KY, LLC - 12451 Plantside Dr, Louisville, KY 40299

State the term remaining

List the contract number of any government contract

Rockwell Debt Free Properties Inc.
8494 South 700 East Ste. 200
Sandy, UT 84070

2.22. State what the contract or lease is for and the nature of the debtor's interest 2/1/2019 - Noah Corporation - 1976 West 700 North, Lindon, UT 84042

State the term remaining

List the contract number of any government contract

Rockwell Debt Free Properties Inc.
8494 South 700 East Ste. 200
Sandy, UT 84070

2.23. State what the contract or lease is for and the nature of the debtor's interest 1/1/2013 - Noah Operations Chandler AZ, LLC - 2100 E Yeager Dr, Chandler, AZ 85286

State the term remaining

List the contract number of any government contract

Rockwell Debt Free Properties Inc.
8494 South 700 East Ste. 200
Sandy, UT 84070

2.24. State what the contract or lease is for and the nature of the debtor's interest 5/6/2014 - Noah Operations Fossil Creek TX, LLC - 4301 Fossil Creek Blvd., Fort Worth, TX 76137

State the term remaining

List the contract number of any government contract

Rockwell Debt Free Properties Inc.
8494 South 700 East Ste. 200
Sandy, UT 84070

2.25. State what the contract or lease is for and the nature of the debtor's interest 8/1/2013 - Noah Operations Richardson TX, LLC - 2251 N Greenville Ave, Richardson, TX 75082

State the term remaining

Rockwell Debt Free Properties Inc.
8494 South 700 East Ste. 200
Sandy, UT 84070

Debtor 1 Noah Corporation

Case number (if known) 19-23840

First Name

Middle Name

Last Name

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

List the contract number of any government contract _____

2.26. State what the contract or lease is for and the nature of the debtor's interest 1/1/2014 - Noah Operations South Jordan UT, LLC - 322 West 11000 South, South Jordan, UT 84070

State the term remaining _____

List the contract number of any government contract _____

Rockwell Debt Free Properties Inc.
8494 South 700 East Ste. 200
Sandy, UT 84070

2.27. State what the contract or lease is for and the nature of the debtor's interest 9/1/2014 - Noah Operations West Des Moines IA, LLC - 1805 90th St, West Des Moines, 50266

State the term remaining _____

List the contract number of any government contract _____

Rockwell Des Moines, LLC
8494 South 700 East, Suite 200
Sandy, UT 84070

2.28. State what the contract or lease is for and the nature of the debtor's interest 4/6/2015 - Noah Operations Dickinson TX, LLC - 3920 Gulf Fwy S, Dickinson, TX 77539

State the term remaining _____

List the contract number of any government contract _____

Rockwell Dickinson, LLC
8494 South 700 East, Suite 200
Sandy, UT 84070

2.29. State what the contract or lease is for and the nature of the debtor's interest 10/1/2017 - Noah Operations Dublin OH, LLC - 6740 Shier Rings Rd., Dublin, OH 43016

State the term remaining _____

List the contract number of any government contract _____

Rockwell Dublin, LLC
8494 South 700 East, Suite 200
Sandy, UT 84070

2.30. State what the contract or lease is for and the nature of the debtor's interest 1/1/2017 - Noah Operations Greenville SC, LLC - 1301 Brookfield Blvd, Greenville, SC 29607

State the term remaining _____

List the contract number of any government contract _____

Rockwell Greenville, LLC
8494 South 700 East, Suite 200
Sandy, UT 84070

Debtor 1 Noah Corporation

Case number (if known) 19-23840

First Name

Middle Name

Last Name

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2.31. State what the contract or lease is for and the nature of the debtor's interest

3/8/2016 - Noah Operations High Point NC, LLC - 4130 Mendenhall Oaks Pkwy, High Point, NC 27265

State the term remaining

List the contract number of any government contract

Rockwell High Point, LLC
8494 South 700 East, Suite 200
Sandy, UT 84070

2.32. State what the contract or lease is for and the nature of the debtor's interest

6/13/2018 - Noah Corporation - 13315 Illinois Street, Carmel, IN 46032

State the term remaining

List the contract number of any government contract

Rockwell Indianapolis, LLC
8494 South 700 East, Suite 200
Sandy, UT 84070

2.33. State what the contract or lease is for and the nature of the debtor's interest

4/1/2018 - Noah Corporation - 11545 Village Crossing Drive, Jacksonville, FL 32256

State the term remaining

List the contract number of any government contract

Rockwell Jacksonville, LLC
8494 South 700 East, Suite 200
Sandy, UT 84070

2.34. State what the contract or lease is for and the nature of the debtor's interest

10/1/2016 - Noah Operations Kingston TN, LLC - 1200 Ladd Landing Boulevard, Kingston, TN 37763

State the term remaining

List the contract number of any government contract

Rockwell Kingston, LLC
8494 South 700 East, Suite 200
Sandy, UT 84070

2.35. State what the contract or lease is for and the nature of the debtor's interest

2/8/2016 - Noah Operations Lake Point NC, LLC - 2421 Yorkmont Rd, Charlotte, NC 28217

State the term remaining

List the contract number of any government contract

Rockwell Lake Point, LLC
8494 South 700 East, Suite 200
Sandy, UT 84070

Debtor 1 Noah Corporation

Case number (if known) 19-23840

First Name

Middle Name

Last Name

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2.36. State what the contract or lease is for and the nature of the debtor's interest

8/1/2015 - Noah Operations Madison WI, LLC - 5020 American Family Dr, Madison, WI 53718

State the term remaining

List the contract number of any government contract

Rockwell Madison, LLC
8494 South 700 East, Suite 200
Sandy, UT 84070

2.37. State what the contract or lease is for and the nature of the debtor's interest

1/1/2015 - Noah Operations Memphis TN, LLC - 3243 Players Club Circle, Memphis, TN 38125

State the term remaining

List the contract number of any government contract

Rockwell Memphis, LLC
8494 South 700 East, Suite 200
Sandy, UT 84070

2.38. State what the contract or lease is for and the nature of the debtor's interest

9/24/2015 - Noah Operations New Albany OH, LLC - 175 East Main Street, New Albany, OH 43054

State the term remaining

List the contract number of any government contract

Rockwell New Albany, LLC
8494 South 700 East, Suite 200
Sandy, UT 84070

2.39. State what the contract or lease is for and the nature of the debtor's interest

6/23/2015 - Noah Operations Omaha NE, LLC - 17121 Marcy St, Omaha, NE 68118

State the term remaining

List the contract number of any government contract

Rockwell Omaha, LLC
8494 South 700 East, Suite 200
Sandy, UT 84070

2.40. State what the contract or lease is for and the nature of the debtor's interest

11/1/2017 - Noah Operations Southfield MI, LLC - 26100 Northwestern Highway, Southfield, MI 48076

State the term remaining

List the contract number of any government contract

Rockwell Southfield, LLC
8494 South 700 East, Suite 200
Sandy, UT 84070

Debtor 1 Noah Corporation

Case number (if known) 19-23840

First Name

Middle Name

Last Name

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2.41. State what the contract or lease is for and the nature of the debtor's interest

5/1/2017 - Noah Operations Southpointe PA, LLC - 2000 Town Center Blvd, Canonsburg, PA 15317

State the term remaining

List the contract number of any government contract

Rockwell Southpointe, LLC
8494 South 700 East, Suite 200
Sandy, UT 84070

2.42. State what the contract or lease is for and the nature of the debtor's interest

7/23/2018 - Noah Corporation - 1355 Arrowhead Circle, Maumee, OH 43537

State the term remaining

List the contract number of any government contract

Rockwell Toledo, LLC
8494 South 700 East, Suite 200
Sandy, UT 84070

2.43. State what the contract or lease is for and the nature of the debtor's interest

8/1/2014 - Noah Operations Wichita KS, LLC - 1550 N Lindberg Cir, Wichita, KS 67206

State the term remaining

List the contract number of any government contract

Rockwell Wichita, LLC
8494 South 700 East, Suite 200
Sandy, UT 84070

2.44. State what the contract or lease is for and the nature of the debtor's interest

5/12/2014 - Noah Operations Utah Valley, LLC - 2640 West 15090 South, Riverton, UT 84065

State the term remaining

List the contract number of any government contract

Rockworks Land, LLC
6867 South 700 West, Suite A
Midvale, UT 84047

2.45. State what the contract or lease is for and the nature of the debtor's interest

11/6/2013 - Noah Operations Sugarland TX, LLC - 16555 Creek Bend Dr Sugarland, TX 77478

State the term remaining

List the contract number of any government contract

SBS Lake Pointe, Ltd.
2810 Revere Street
Houston, TX 77098

2.46. State what the contract or lease is for and the nature of the debtor's interest

5/21/2013 - Noah Operations Katy TX LLC - 12402 Merchants Way, Katy, TX 77449

SBS Mason Creek, Ltd.
2810 Revere Street
Houston, TX 77098

Debtor 1 Noah Corporation

Case number (if known) 19-23840

First Name

Middle Name

Last Name

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

State the term remaining

List the contract number of any
government contract

2.47. State what the contract or lease is for and the nature of the debtor's interest 8/30/2012 - Noah Operations Fairview TX, LLC - 351 Southwind Ln, Fairview, TX 75069

State the term remaining

List the contract number of any
government contract

Town of Fairview, TX
Attn: Town Manager
372 Town Place
Fairview, TX 75069

2.48. State what the contract or lease is for and the nature of the debtor's interest 6/1/2011 - Noah Operations Westminster CO, LLC - 11885 Bradburn Blvd., Westminster, CO 80031

State the term remaining

List the contract number of any
government contract

William Jeff Newman and Shirley Newman
13331 South Redwood Road
Riverton, UT 84065

Fill in this information to identify the case:

Debtor name Noah Corporation

United States Bankruptcy Court for the: DISTRICT OF UTAH

Case number (if known) 19-23840

☐ Check if this is an amended filing

Official Form 206H

Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.

☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

Name

Mailing Address

Name

Check all schedules that apply:

2.1 William J. Bowser

55 West South Temple, #404W
Salt Lake City, UT 84101

TIC Owners -
Richardson

☐ D _____
☒ E/F 3.781
☐ G _____

2.2 William J. Bowser

55 West South Temple, #404W
Salt Lake City, UT 84101

TIC Owners - Chandler

☐ D _____
☒ E/F 3.753
☐ G _____

2.3 William J. Bowser

55 West South Temple, #404W
Salt Lake City, UT 84101

TIC Owners - South
Jordan

☐ D _____
☒ E/F 3.783
☐ G _____

Fill in this information to identify the case:

Debtor name Noah Corporation

United States Bankruptcy Court for the: DISTRICT OF UTAH

Case number (if known) 19-23840

☐ Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/19

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income

1. Gross revenue from business

☐ None.

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

From the beginning of the fiscal year to filing date:
From 1/01/2019 to Filing Date

Sources of revenue
Check all that apply

☒ Operating a business
☐ Other _____

Gross revenue
(before deductions and exclusions)

\$7,970,314.00

For prior year:
From 1/01/2018 to 12/31/2018

☒ Operating a business
☐ Other _____

\$17,320,502.00

For year before that:
From 1/01/2017 to 12/31/2017

☒ Operating a business
☐ Other _____

\$20,164,056.00

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None.

Description of sources of revenue

Gross revenue from each source
(before deductions and exclusions)

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None.

Creditor's Name and Address

Dates

Total amount of value

Reasons for payment or transfer
Check all that apply

Debtor Noah CorporationCase number (if known) 19-23840

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. See attached Schedule 3		\$0.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other ____

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,825. (This amount may be adjusted on 4/01/22 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☐ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
4.1. See attached Schedule 1		\$0.00	

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

Creditor's name and address	Describe of the Property	Date	Value of property
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6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
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Part 3: Legal Actions or Assignments**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1. Noah's Inc. v. Noah Corporation 4:2018cv00272	Trademark Infringement	US District Court - So Dist of Iowa 123 East Walnut Street Des Moines, IA 50309	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.2. DiTucci et al v. Ashby et al. 2:2019cv00277		US District Court for the District of UT 351 South West Temple Salt Lake City, UT 84101	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor Noah Corporation

Case number (if known) 19-23840

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.3.	Workforce Services v. Noah Corporation 186500876	Workforce Services Lien	Third Judicial District Court-Silve Sumt 6300 Justice Center Road, Suite A Park City, UT 84098	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.4.	Jill Dempsey v. Duo Venues, LLC et al. 180401885	Contracts	4th Judicial District Court-Utah County 137 N Freedom Blvd Provo, UT 84601	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.5.	Noah Corporation v. Kathleen P Lopez 190400283	Contracts	4th Judicial District Court-Utah County 137 N Freedom Blvd Provo, UT 84601	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None

Part 4: Certain Gifts and Charitable Contributions**9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**

☒ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
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Part 5: Certain Losses**10. All losses from fire, theft, or other casualty within 1 year before filing this case.**

☒ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Dates of loss	Value of property lost
	<p>If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.</p> <p>List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).</p>		

Part 6: Certain Payments or Transfers**11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

Debtor Noah Corporation

Case number (if known) 19-23840

Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1. See attached Schedule 5			\$0.00
Email or website address			
Who made the payment, if not debtor?			

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.
Do not include transfers already listed on this statement.

☒ None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
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13. Transfers not already listed on this statement

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None.

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
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Part 7: Previous Locations**14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☐ Does not apply

Address	Dates of occupancy From-To
14.1. P O Box 1289 Riverton, UT 84065	8/10 - 11/17
14.2. 3400 N Ashton Blvd, Suite 490 Lehi, UT 84043	11/17 to 11/18
14.3. 2600 N Executive Parkway Lehi, UT 84043	11/18 to Present

Part 8: Health Care Bankruptcies**15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:
- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

☒ No. Go to Part 9.

☐ Yes. Fill in the information below.

Debtor Noah CorporationCase number (if known) 19-23840

Facility name and address

Nature of the business operation, including type of services the debtor provides

If debtor provides meals and housing, number of patients in debtor's care

Part 9: Personally Identifiable Information**16. Does the debtor collect and retain personally identifiable information of customers?**

- ☐ No.
- ☒ Yes. State the nature of the information collected and retained.

Addresses, Credit Card Numbers, etc.

Does the debtor have a privacy policy about that information?

- ☐ No
- ☒ Yes

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?

- ☒ No. Go to Part 10.
- ☐ Yes. Does the debtor serve as plan administrator?

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☐ None

	Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1.	Chase Bank	XXXX-0058	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other__	3/1/19	\$578.99
18.2.	Chase Bank	XXXX-8325	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other__	4/1/19	\$0.00
18.3.	Chase Bank	XXXX-7819	<input type="checkbox"/> Checking <input checked="" type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other__	5/1/19	\$0.00

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

Debtor Noah CorporationCase number (if known) 19-23840☐ None

Depository institution name and address

Names of anyone with
access to it
Address

Description of the contents

Do you still
have it?**20. Off-premises storage**

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☐ None

Facility name and address

Names of anyone with
access to it

Description of the contents

Do you still
have it?**Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own****21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☐ None**Part 12: Details About Environment Information**

For the purpose of Part 12, the following definitions apply:

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

Site means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.☐ No.☐ Yes. Provide details below.Case title
Case numberCourt or agency name and
address

Nature of the case

Status of case

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?☐ No.☐ Yes. Provide details below.

Site name and address

Governmental unit name and
address

Environmental law, if known

Date of notice

24. Has the debtor notified any governmental unit of any release of hazardous material?☐ No.☐ Yes. Provide details below.

Site name and address

Governmental unit name and
address

Environmental law, if known

Date of notice

Part 13: Details About the Debtor's Business or Connections to Any Business

Debtor Noah Corporation

Case number (if known) 19-23840

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

☐ None

Business name address**Describe the nature of the business****Employer Identification number**

Do not include Social Security number or ITIN.

Dates business existed

EIN:

From-To

25.1. See attached Schedule 6

26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

☐ None

Name and address**Date of service****From-To**

26a.1. King & McLeary
240 West Main Street
American Fork, UT 84003

Approx. 9/08 to 6/17

26a.2. Ayisha Farmer
899 South Main Street
Orem, UT 84058

Approx. 6/17 to 11/17

26a.3. Mana Rowley
8746 N Berkshire Ln
Eagle Mountain, UT 84005

Approx. 11/17 to 11/18

26a.4. Nancy Neil
2640 West 15090 South
Bluffdale, UT 84065

26a.5. Gardner, Hayley
4646 W Serendipity Way
South Jordan, UT 84009

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☒ None

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☐ None

Name and address**If any books of account and records are unavailable, explain why**

26c.1. Jensen, Kathren
127 West 5878 South
Murray, UT 84107

26c.2. Gardner, Hayley
4646 W Serendipity Way
South Jordan, UT 84009

26c.3. William J. Bowser
55 West South Temple, #404W
Salt Lake City, UT 84101

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial

Debtor Noah CorporationCase number (if known) 19-23840

statement within 2 years before filing this case.

☐ None**Name and address**26d.1. Libertas26d.2. Cybersource26d.3. Chase Bank**27. Inventories**

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No☐ Yes. Give the details about the two most recent inventories.**Name of the person who supervised the taking of the inventory****Date of inventory****The dollar amount and basis (cost, market, or other basis) of each inventory****28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.**

Name	Address	Position and nature of any interest	% of interest, if any
William J. Bowser	55 West South Temple, #404W Salt Lake City, UT 84101	President, Director	3
Name	Address	Position and nature of any interest	% of interest, if any
Steve Trumbo	1599 North 1550 East Provo, UT 84604	Director	3
Name	Address	Position and nature of any interest	% of interest, if any
Nicholas Redd	12547 S Stonebridge Cir. Draper, UT 84020	Director	1
Name	Address	Position and nature of any interest	% of interest, if any
Cheryl Wilde	233 West 800 North American Fork, UT 84003	Secretary	

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?☒ No☐ Yes. Identify below.**30. Payments, distributions, or withdrawals credited or given to insiders**

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

☐ No☒ Yes. Identify below.

Debtor Noah Corporation

Case number (if known) 19-23840

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
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30.1 See attached Schedule 4

Relationship to debtor

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☐ No
☒ Yes. Identify below.

Name of the parent corporation

Noah Corporation

Employer Identification number of the parent corporation

EIN: 02-0706434

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☒ No
☐ Yes. Identify below.

Name of the pension fund

Employer Identification number of the parent corporation

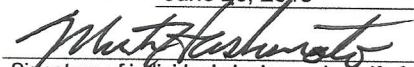
Part 14: Signature and Declaration

WARNING – Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on June 20, 2019


Signature of individual signing on behalf of the debtor

Mark Hashimoto
Printed name

Position or relationship to debtor Chief Restructuring Officer

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

- ☒ No
☐ Yes

SCHEDULE 1

NOAH CORPORATION
LIST OF EQUIPMENT

	Cost	Estimated Market Value
Monitors	\$ 15,800.31	\$ 4,000.00
iPads	\$ 53,677.00	\$ 15,000.00
Computers	\$ 37,635.28	\$ 10,000.00
Printers	\$ 16,361.66	\$ 5,000.00
Projector Lamps	\$ 40,000.00	\$ 10,000.00
Mics and Bose Towers	\$ 5,378.95	\$ 2,000.00
Misc	\$ 14,004.42	\$ 4,000.00
Total	<u>\$ 182,857.62</u>	<u>\$ 50,000.00</u>

SCHEDULE 2

**NOAH CORPORATION
EXECUTORY LEASES**

Location	Property Address	Lease Type	Current Value
Albuquerque	4591 Vista Fuente Rd NW Albuquerque, NM 87114	Real Property	\$ -
Auburn Hills	3391 Cross Creek Parkway Auburn Hills, MI 48326	Real Property	\$ -
Bedford	379 South River Rd, Bedford, NH 03110	Real Property	\$ -
Blue Ash	10627 Techwoods Circle, Blue Ash, OH 45242	Real Property	\$ -
Chandler	2100 E Yeager Dr Chandler, AZ 85286	Real Property	\$ -
Charlotte	2421 Yorkmont Rd Charlotte, NC 28217	Real Property	\$ -
Chesapeake	625 Independence Pkwy Chesapeake, VA 23320	Real Property	\$ -
Cranberry	10020 Pendleton Way Cranberry Township, PA 16066	Real Property	\$ -
Des Moines	1805 90th St West Des Moines, IA 50266	Real Property	\$ -
Dickinson	3920 Gulf Fwy S Dickinson, TX 77539	Real Property	\$ -
Fairview	351 Southwind Ln Fairview, TX 75069	Real Property	\$ -
Ft. Worth	4301 Fossil Creek Blvd, Fort Worth, TX 76137	Real Property	\$ -
Greenville	1301 Brookfield Blvd Greenville, SC 29607	Real Property	\$ -
High Point	4130 Mendenhall Oaks Pkwy High Point, NC 27265	Real Property	\$ -
Hoover	2501 International Park Pl Hoover, AL 35216	Real Property	\$ -
Katy	12402 Merchants Way Katy, TX 77449	Real Property	\$ -
Kingston	1200 Ladd Landing Boulevard, Kingston, TN 37763	Real Property	\$ -
Lake Mary	720 Currency Cir Lake Mary, FL 32746	Real Property	\$ -
Las Colinas / Irving	6101 E Campus Circle Dr Irving, TX 75063	Real Property	\$ -
Lincolnshire	200 Barclay Boulevard, Lincolnshire, IL 60069	Real Property	\$ -
Lindon	1976 W 700 N Lindon, UT 84042	Real Property	\$ -
Little Rock	21 Rahling Cir Little Rock, AR 72223	Real Property	\$ -
Louisville	12451 Plantside Dr Louisville, KY 40299	Real Property	\$ -
Madison	5020 American Family Dr Madison, WI 53718	Real Property	\$ -
Memphis	3243 Players Club Circle Memphis, TN 38125	Real Property	\$ -
Mentor	8200 Norton Parkway Mentor, OH 44060	Real Property	\$ -
Morrisville	5180 Paramount Pkwy Morrisville, NC 27560	Real Property	\$ -
Naperville	119 Shuman Blvd Naperville, IL 60563	Real Property	\$ -
New Albany	175 E Main St, New Albany, OH 43054	Real Property	\$ -
Oklahoma City	14017 Quail Springs Pkwy Oklahoma City, OK 73134	Real Property	\$ -
Omaha	17121 Marcy St Omaha, NE 68118	Real Property	\$ -
Overland Park	7341 W 133RD ST Overland Park, KS 66213	Real Property	\$ -
Plano	5280 Towne Square Drive Plano, TX 75024	Real Property	\$ -
Richardson B5	2251 N Greenville Ave Richardson, TX 75082	Real Property	\$ -
San Antonio	18918 Ridgewood Pkwy San Antonio, TX 78259	Real Property	\$ -
South Jordan	322 W 11000 S South Jordan, UT 84070	Real Property	\$ -
Southfield	26100 Northwestern Highway, Southfield, MI 48076	Real Property	\$ -
Southpointe	2000 Town Center Blvd, Canonsburg, PA 15317	Real Property	\$ -
Sugarland	16555 Creek Bend Dr Sugarland, TX 77478	Real Property	\$ -
Tulsa	12710 E State Farm Blvd. Tulsa, OK 74146	Real Property	\$ -
Westminster	11885 Bradburn Blvd Westminster, CO 80031	Real Property	\$ -
Wichita	1550 N Lindberg Cir, Wichita, KS 67206	Real Property	\$ -
Toledo	1355 Arrowhead Circle, Maumee, OH 43537	Real Property	\$ -
Carmel	13315 Illinois Street, Carmel, IN 46032	Real Property	\$ -
Dublin	6740 Shier Rings Rd, Dublin, OH 43016	Real Property	\$ -
Independence	4805 Acorn Drive, Independence, OH 44131	Real Property	\$ -
Jacksonville	11545 Village Crossing Drive, Jacksonville, FL 32256	Real Property	\$ -
Total			\$ -

SCHEDULE 3

NOAH CORPORATION
PAYMENTS TO CREDITORS IN 90 DAY PRE-PETITION PERIOD

Type	Date	Payee	Amount	Purpose
DEBIT	3/1/2019	Sentinel	\$67,318.00	Rent
DEBIT	3/1/2019	Divvy T Check Operational Payments	\$17,000.00	Operations
DEBIT	3/1/2019	UTAH801/297-7703 TAX PAYMNT	\$7,441.35	Payroll Tax
DEBIT	3/1/2019	Sherrie East	\$6,231.25	Interest
DEBIT	3/1/2019	Judi Navarro	\$4,787.50	Interest
CHECK	3/1/2019	CHECK 5573 Elias Day Trust	\$3,000.00	Interest
DEBIT	3/1/2019	FEDCHEX	\$2,458.00	Interest
DEBIT	3/1/2019	LIBERTASFUNDING	\$2,457.14	Interest
DEBIT	3/1/2019	Krista Fazendin	\$748.17	Interest
DEBIT	3/4/2019	Sentinel	\$265,971.41	Rent
DEBIT	3/4/2019	Divvy T Check Operational Payments	\$23,000.00	Operations
CHECK	3/4/2019	CHECK 6128 Granite Landscape	\$4,667.75	Landscape
CHECK	3/4/2019	CHECK 6129 T-Squared Landscape	\$3,765.00	Landscape
CHECK	3/4/2019	CHECK 6131 ASK Janitorial	\$3,528.00	Maintenance
DEBIT	3/4/2019	FEDCHEX	\$2,458.00	Interest
DEBIT	3/4/2019	LIBERTASFUNDING	\$2,457.14	Interest
CHECK	3/4/2019	CHECK 6036 Alabama Power	\$2,385.90	Utility
CHECK	3/4/2019	CHECK 5585 Adam Hutchison	\$1,571.25	Event Refund
CHECK	3/4/2019	CHECK 6053 Entergy	\$1,457.50	Utility
CHECK	3/4/2019	CHECK 6072 City of Naperville	\$1,137.80	Utility
CHECK	3/4/2019	CHECK 6061 MG&E	\$1,025.05	Utility
CHECK	3/4/2019	CHECK 6055 Louisville Water Company	\$1,024.33	Utility
DEBIT	3/4/2019	Cybersource	\$633.68	Merchant Fee
CHECK	3/4/2019	CHECK 6112 Westar Energy	\$592.56	Utility
CHECK	3/4/2019	CHECK 6065 Illuminating Company	\$468.39	Utility
CHECK	3/4/2019	CHECK 6004 City of Auburn Hills	\$388.94	Utility
CHECK	3/4/2019	CHECK 6100 City of Tulsa	\$377.00	Utility
CHECK	3/4/2019	CHECK 6070 PSNC	\$341.34	Utility
CHECK	3/4/2019	CHECK 6059 Charter Communications	\$322.58	Utility
CHECK	3/4/2019	CHECK 6126 HRUBS	\$307.13	Utility
CHECK	3/4/2019	CHECK 6080 Cox Business	\$266.55	Utility
CHECK	3/4/2019	CHECK 6042 Seminole County	\$188.99	Utility
DEBIT	3/4/2019	Drake Dover	\$135.75	Interest
CHECK	3/4/2019	CHECK 6123 Dynamark Monitoring	\$122.94	Utility
CHECK	3/4/2019	CHECK 6054 Dynamark Monitoring	\$115.98	Utility
CHECK	3/4/2019	CHECK 6001 Dynamark Monitoring	\$115.98	Utility
DEBIT	3/4/2019	MOBILES*SLYBROADCAST	\$100.00	Utility
CHECK	3/4/2019	CHECK 6013 JK Alarms	\$26.58	Maintenance
DEBIT	3/5/2019	IRS USATAXPYMT	\$81,410.21	Payroll Tax
DEBIT	3/5/2019	Divvy T Check Operational Payments	\$20,000.00	Operations
DEBIT	3/5/2019	Hayley Gardner	\$6,000.00	Employee Reimbursement
CHECK	3/5/2019	CHECK 6007 Liberty Utilities	\$3,324.65	Utility
DEBIT	3/5/2019	FEDCHEX	\$2,458.00	Interest
DEBIT	3/5/2019	LIBERTASFUNDING	\$2,457.14	Interest
CHECK	3/5/2019	CHECK 6011 Century Link	\$2,007.81	Utility
CHECK	3/5/2019	CHECK 6032 City of High Point	\$1,619.04	Utility
DEBIT	3/5/2019	Susanna Bowser	\$1,500.00	Employee Reimbursement
CHECK	3/5/2019	CHECK 6019 Stratus Building Solutions	\$1,385.65	Janitorial Services
CHECK	3/5/2019	CHECK 6056 LG&E	\$1,278.75	Utility
DEBIT	3/5/2019	OPTUM BANK	\$1,169.17	Insurance
CHECK	3/5/2019	CHECK 6016 Cox Business	\$1,111.01	Utility
DEBIT	3/5/2019	SERVICE CHARGES FOR THE MONTH OF FEBRUARY	\$1,011.50	Bank Fee
DEBIT	3/5/2019	American Express	\$1,000.00	CC Reimb.-Susanna Bowser
CHECK	3/5/2019	CHECK 6079 OPPD	\$802.55	Utility

NOAH CORPORATION
PAYMENTS TO CREDITORS IN 90 DAY PRE-PETITION PERIOD

Type	Date	Payee	Amount	Purpose
CHECK	3/5/2019	CHECK 6096 West Penn Power	\$707.62	Utility
DEBIT	3/5/2019	OPTUM BANK	\$672.52	Insurance
CHECK	3/5/2019	CHECK 6118 City of Plano	\$570.74	Utility
CHECK	3/5/2019	CHECK 6049 COMED	\$539.87	Utility
CHECK	3/5/2019	CHECK 6099 Public Service Company	\$472.90	Utility
CHECK	3/5/2019	CHECK 6027 City of Fort Worth	\$472.86	Utility
CHECK	3/5/2019	CHECK 6077 Overland Park Kansas Chamber of Commerce	\$425.00	Dues & Subs.
CHECK	3/5/2019	CHECK 6075 Cox Business	\$373.30	Utility
CHECK	3/5/2019	CHECK 6106 Xmission	\$353.34	Utility
DEBIT	3/5/2019	COMMWLTHOFPA	\$342.19	Payroll Tax
CHECK	3/5/2019	CHECK 6101 Cox Business	\$309.83	Utility
CHECK	3/5/2019	CHECK 6116 Waste Connections	\$301.26	Utility
CHECK	3/5/2019	CHECK 6115 Cox Business	\$282.75	Utility
CHECK	3/5/2019	CHECK 6125 Cranberry Township	\$241.35	Utility
CHECK	3/5/2019	CHECK 6025 Town of Fairview	\$208.74	Utility
CHECK	3/5/2019	CHECK 6021 Direct TV	\$202.50	Utility
CHECK	3/5/2019	CHECK 6074 City of Oklahoma City	\$198.04	Utility
CHECK	3/5/2019	CHECK 6066 AT&T	\$95.69	Utility
CHECK	3/5/2019	CHECK 6046 United Fire Protection	\$63.82	Maintenance
DEBIT	3/6/2019	Divvy T Check Operational Payments	\$15,000.00	Operations
CHECK	3/6/2019	CHECK 6045 The Primera Owner's Association	\$7,512.94	HOA
CHECK	3/6/2019	CHECK 6084 Time Warner Cable	\$7,171.41	Utility
CHECK	3/6/2019	CHECK 6044 Duke Energy	\$3,679.63	Utility
CHECK	3/6/2019	CHECK 6109 Olson Restoration	\$3,414.91	Maintenance
DEBIT	3/6/2019	UMR INC CONCENTR FUNDING	\$2,613.83	Health Insurance
DEBIT	3/6/2019	FEDCHEX	\$2,458.00	Interest
DEBIT	3/6/2019	LIBERTASFUNDING	\$2,457.14	Interest
CHECK	3/6/2019	CHECK 6082 TXU Energy	\$1,509.21	Utility
CHECK	3/6/2019	CHECK 6110 Xcel Energy	\$1,432.03	Utility
CHECK	3/6/2019	CHECK 6017 DMK Electrial	\$1,250.00	Maintenance
CHECK	3/6/2019	CHECK 6088 San Antonio Water Systems	\$1,193.45	Utility
CHECK	3/6/2019	CHECK 6047 Comcast	\$1,049.76	Utility
CHECK	3/6/2019	CHECK 6104 Rocky Mountain Power	\$1,004.60	Utility
CHECK	3/6/2019	CHECK 6038 Entouch Systems	\$901.90	Utility
CHECK	3/6/2019	CHECK 6087 San Antonio Water System	\$861.48	Utility
DEBIT	3/6/2019	AEP	\$770.44	Utility
CHECK	3/6/2019	CHECK 6076 Kansas Gas Service	\$762.53	Utility
DEBIT	3/6/2019	AMERICAN HERITAG BENMAN	\$733.69	Insurance
CHECK	3/6/2019	CHECK 6005 DTE Energy	\$720.25	Utility
CHECK	3/6/2019	CHECK 6006 Comcast	\$675.69	Utility
CHECK	3/6/2019	CHECK 6113 Kansas Gas Service	\$672.77	Utility
CHECK	3/6/2019	CHECK 6030 Johnson Controls Fire Protection	\$545.00	Maintenance
DEBIT	3/6/2019	Nicor Gas	\$536.48	Utility
CHECK	3/6/2019	CHECK 6015 Duke Energy	\$524.67	Utility
CHECK	3/6/2019	CHECK 6043 City of Lake Mary	\$474.31	Utility
CHECK	3/6/2019	CHECK 6094 Consumers Energy	\$459.25	Utility
CHECK	3/6/2019	CHECK 6102 Oklahoma Natural Gas	\$434.55	Utility
CHECK	3/6/2019	CHECK 6029 Charter Communications	\$404.98	Utility
CHECK	3/6/2019	CHECK 6108 Century Link	\$395.62	Utility
DEBIT	3/6/2019	PIEDMONT	\$392.52	Utility
CHECK	3/6/2019	CHECK 6008 Republic Services	\$364.46	Utility
DEBIT	3/6/2019	Cybersource	\$360.00	Merchant Fee
CHECK	3/6/2019	CHECK 6040 Frontier Communications	\$356.14	Utility
DEBIT	3/6/2019	Cybersource	\$300.02	Merchant Fee

NOAH CORPORATION
PAYMENTS TO CREDITORS IN 90 DAY PRE-PETITION PERIOD

Type	Date	Payee	Amount	Purpose
CHECK	3/6/2019	CHECK 6023 Republic Services	\$204.38	Utility
CHECK	3/6/2019	CHECK 6033 Republic Services	\$193.45	Utility
CHECK	3/6/2019	CHECK 6069 Aqua OH	\$187.35	Utility
CHECK	3/6/2019	CHECK 6018 Century Link	\$182.42	Utility
CHECK	3/6/2019	CHECK 6028 Greenville Water	\$174.59	Utility
CHECK	3/6/2019	CHECK 6063 Republic Services	\$156.68	Utility
CHECK	3/6/2019	CHECK 6068 Aqua OH	\$136.82	Utility
CHECK	3/6/2019	CHECK 6089 Century Link	\$112.60	Utility
CHECK	3/6/2019	CHECK 6020 West Des Moines Water Works	\$100.23	Utility
CHECK	3/6/2019	CHECK 6103 JE Systems	\$84.64	Maintenance
CHECK	3/6/2019	CHECK 6114 Public Work & Utilities	\$78.92	Utility
DEBIT	3/7/2019	TAX OFFICEGDS PURCHASE	\$51,673.71	Payroll Tax
DEBIT	3/7/2019	UMR INC CONCENTR	\$21,942.72	Health Insurance
DEBIT	3/7/2019	Divvy T Check Operational Payments	\$20,000.00	Operations
DEBIT	3/7/2019	FEDCHEX	\$2,458.00	Interest
DEBIT	3/7/2019	LIBERTASFUNDING	\$2,457.14	Interest
DEBIT	3/7/2019	Duke Energy	\$1,907.19	Utility
CHECK	3/7/2019	CHECK 6041 TXU Energy	\$1,612.56	Utility
CHECK	3/7/2019	CHECK 6086 TXU Energy	\$1,549.55	Utility
CHECK	3/7/2019	CHECK 6026 TXU Energy	\$1,539.77	Utility
DEBIT	3/7/2019	American Express	\$1,500.00	CC Reimb.-Susanna Bowser
CHECK	3/7/2019	CHECK 6010 CCMC	\$1,440.91	Utility
CHECK	3/7/2019	CHECK 6024 TXU Energy	\$1,330.16	Utility
CHECK	3/7/2019	CHECK 6073 Columbia Gas	\$1,204.09	Utility
CHECK	3/7/2019	CHECK 6144 SRP	\$1,066.36	Utility
CHECK	3/7/2019	CHECK 6048 North Shore Gas	\$1,058.74	Utility
CHECK	3/7/2019	CHECK 6037 TXU Energy	\$1,037.60	Utility
CHECK	3/7/2019	CHECK 5494 City of Naperville	\$1,000.00	Licensing
CHECK	3/7/2019	CHECK 6002 Comcast	\$758.33	Utility
CHECK	3/7/2019	CHECK 6134 PNM	\$747.28	Utility
CHECK	3/7/2019	CHECK 6277 Dominion Energy	\$697.02	Utility
CHECK	3/7/2019	CHECK 6117 ABCWUA	\$656.40	Utility
DEBIT	3/7/2019	PIEDMONT N. G.	\$617.81	Utility
CHECK	3/7/2019	CHECK 6119 Comcast	\$575.68	Utility
CHECK	3/7/2019	CHECK 6022 TXU Energy	\$530.99	Utility
CHECK	3/7/2019	CHECK 6133 New Mexico Gas Company	\$464.92	Utility
CHECK	3/7/2019	CHECK 6124 CCI	\$427.75	Utility
CHECK	3/7/2019	CHECK 6052 Centerpointe Energy	\$394.29	Utility
DEBIT	3/7/2019	DIRECTV DIRECTV 7540659 TEL ID: 0000035774	\$330.31	Utility
CHECK	3/7/2019	CHECK 6146 City of Chandler	\$314.44	Utility
CHECK	3/7/2019	CHECK 6130 City Treasurer	\$274.36	Utility
DEBIT	3/7/2019	SALTLAKECOTAX UT	\$270.09	Payroll Tax
CHECK	3/7/2019	CHECK 5582 Tiffany hawkins	\$250.00	Event Refund
CHECK	3/7/2019	CHECK 6060 City Treasurer	\$207.54	Utility
CHECK	3/7/2019	CHECK 6170 Direct TV	\$173.81	Utility
CHECK	3/7/2019	CHECK 6178 Birmingham Water Works	\$154.73	Utility
CHECK	3/7/2019	CHECK 6177 Birmingham Water Works	\$80.37	Utility
CHECK	3/7/2019	CHECK 6078 Atronic Alarms	\$73.82	Maintenance
CHECK	3/7/2019	CHECK 6035 Alabama Alarm	\$50.00	Maintenance
DEBIT	3/7/2019	OFFICIAL PAYMENT ECHECK FEE	\$1.25	Merchant Fee
DEBIT	3/8/2019	Divvy T Check Operational Payments	\$26,000.00	Operations
DEBIT	3/8/2019	FEDCHEX	\$2,458.00	Interest
DEBIT	3/8/2019	LIBERTASFUNDING	\$2,457.14	Interest

NOAH CORPORATION
PAYMENTS TO CREDITORS IN 90 DAY PRE-PETITION PERIOD

Type	Date	Payee	Amount	Purpose
CHECK	3/8/2019	CHECK 6171 Laurens Electric	\$1,914.88	Utility
CHECK	3/8/2019	CHECK 6050 03/08 Xtreme Fire Protection	\$1,080.00	Maintenance
CHECK	3/8/2019	CHECK 6097 Columbia Gas	\$942.78	Utility
CHECK	3/8/2019	CHECK 6282 Cox Business	\$315.52	Utility
CHECK	3/8/2019	CHECK 6083 Republic Services	\$282.10	Utility
CHECK	3/8/2019	CHECK 6182 Weston Mud	\$236.30	Utility
CHECK	3/8/2019	CHECK 6071 Town of Cary	\$233.15	Utility
CHECK	3/8/2019	CHECK 6105 Republic Serives	\$204.18	Utility
CHECK	3/8/2019	CHECK 6098 Republic Services	\$141.14	Utility
CHECK	3/8/2019	CHECK 6149 City of Charlotte	\$125.98	Utility
DEBIT	3/11/2019	Sentinel	\$74,152.00	Rent
DEBIT	3/11/2019	Cadence	\$69,913.00	Rent
CHECK	3/11/2019	CHECK 5571 Bevi Bar	\$33,421.97	Noah Beverages
DEBIT	3/11/2019	Divvy T Check Operational Payments	\$15,000.00	Operations
CHECK	3/11/2019	CHECK 6122 Lincolnshire Corporate Center Association	\$2,479.28	HOA
DEBIT	3/11/2019	FEDCHEX	\$2,458.00	Interest
DEBIT	3/11/2019	LIBERTASFUNDING	\$2,457.14	Interest
CHECK	3/11/2019	CHECK 6107 Automated Mechanical	\$509.75	Maintenance
CHECK	3/11/2019	CHECK 6090 Automated Mechanical	\$500.00	Maintenance
CHECK	3/11/2019	CHECK 6224 Columbus City Treasurer	\$431.99	Utility
CHECK	3/11/2019	CHECK 6051 Comcast	\$413.08	Utility
CHECK	3/11/2019	CHECK 6243 Cox Business	\$296.55	Utility
CHECK	3/11/2019	CHECK 6039 Comcast	\$256.44	Utility
CHECK	3/11/2019	CHECK 6169 Greenville Water	\$200.75	Utility
CHECK	3/11/2019	CHECK 6003 Great Western Speciality	\$80.91	Maintenance
CHECK	3/11/2019	CHECK 6272 CTMA	\$80.64	Utility
DEBIT	3/12/2019	IRS USATAXPYMT	\$37,141.86	Payroll Tax
DEBIT	3/12/2019	Divvy T Check Operational Payments	\$15,000.00	Operations
CHECK	3/12/2019	CHECK 6009 03/12 Reliable Refridgeration	\$3,853.41	Maintenance
DEBIT	3/12/2019	FEDCHEX	\$2,458.00	Interest
DEBIT	3/12/2019	LIBERTASFUNDING	\$2,457.14	Interest
CHECK	3/12/2019	CHECK 6127 Lucid Software	\$1,291.31	Software
CHECK	3/12/2019	CHECK 6111 Integrated Security Systems	\$420.00	Maintenance
CHECK	3/12/2019	CHECK 6091 City of South Jordan	\$234.79	Utility
CHECK	3/12/2019	CHECK 6058 Franklin Pest Control	\$152.25	Maintenance
CHECK	3/12/2019	CHECK 6012 Fish Window Cleaning	\$78.00	Maintenance
CHECK	3/12/2019	CHECK 6067 Sievers Security	\$47.08	Maintenance
DEBIT	3/13/2019	Divvy T Check Operational Payments	\$23,000.00	Operations
DEBIT	3/13/2019	Travelers INS PREM	\$13,932.22	Insurance
DEBIT	3/13/2019	Doug and Ilean Sullivan	\$6,485.22	Interest
DEBIT	3/13/2019	Robyn Openshaw	\$5,131.28	Interest
DEBIT	3/13/2019	Nancy Neil	\$3,506.66	Interest
DEBIT	3/13/2019	Robert Baker	\$3,439.92	Interest
DEBIT	3/13/2019	Elaine Horrocks LP	\$3,333.33	Interest
CHECK	3/13/2019	CHECK 5575 UNUM	\$3,052.37	Insurance
CHECK	3/13/2019	CHECK 6095 Southpointe Town Center	\$2,789.60	HOA
DEBIT	3/13/2019	Kristin Matthews	\$2,558.34	Interest
DEBIT	3/13/2019	Bret Bailey	\$2,479.19	Interest
DEBIT	3/13/2019	FEDCHEX	\$2,458.00	Interest
DEBIT	3/13/2019	LIBERTASFUNDING	\$2,457.14	Interest
DEBIT	3/13/2019	Lorrie Stark	\$1,975.76	Interest
DEBIT	3/13/2019	Linda Tyler	\$1,366.67	Interest
CHECK	3/13/2019	CHECK 6132 SCH Mechanical	\$1,329.84	Maintenance
CHECK	3/13/2019	CHECK 6279 P&E Building Services	\$1,298.81	Landscape

NOAH CORPORATION
PAYMENTS TO CREDITORS IN 90 DAY PRE-PETITION PERIOD

Type	Date	Payee	Amount	Purpose
CHECK	3/13/2019	CHECK 6274 TXU Energy	\$1,225.42	Utility
DEBIT	3/13/2019	Steve Livingston	\$1,023.00	Interest
CHECK	3/13/2019	CHECK 6139 Consumers Energy	\$889.20	Utility
DEBIT	3/13/2019	James Wallace	\$852.08	Interest
DEBIT	3/13/2019	Elaine Horrocks	\$833.33	Interest
DEBIT	3/13/2019	Debra Aaron	\$833.33	Interest
DEBIT	3/13/2019	UMR INC CONCENTR	\$723.94	Health Insurance
DEBIT	3/13/2019	Jeff Limb	\$566.67	Interest
DEBIT	3/13/2019	INTUIT PYMT	\$6.00	Merchant Fee
DEBIT	3/14/2019	Divvy T Check Operational Payments	\$20,000.00	Operations
DEBIT	3/14/2019	Susan Peterson	\$11,457.12	Interest
DEBIT	3/14/2019	Moyce Family Trust	\$4,000.00	Interest
DEBIT	3/14/2019	76 Investments, LP	\$3,000.00	Interest
DEBIT	3/14/2019	Matthew Francom	\$2,615.00	Interest
CHECK	3/14/2019	CHECK 5580 S&O	\$2,500.00	Noah Beverages
DEBIT	3/14/2019	FEDCHEX	\$2,458.00	Interest
DEBIT	3/14/2019	LIBERTASFUNDING	\$2,457.14	Interest
DEBIT	3/14/2019	The Real Mint LLC	\$2,000.00	Interest
DEBIT	3/14/2019	Bonin	\$2,000.00	Interest
DEBIT	3/14/2019	Dan Naylor	\$2,000.00	Interest
DEBIT	3/14/2019	Lund Family Trust	\$1,850.00	Interest
DEBIT	3/14/2019	Norman Lee	\$1,500.00	Interest
DEBIT	3/14/2019	Anthony Perricone	\$1,500.00	Interest
DEBIT	3/14/2019	Raja	\$1,000.00	Interest
DEBIT	3/14/2019	Thomas Funk	\$1,000.00	Interest
DEBIT	3/14/2019	Stephen Lewis	\$1,000.00	Interest
DEBIT	3/14/2019	Dryjas Holdings LLC	\$1,000.00	Interest
DEBIT	3/14/2019	Benjamin Thomas	\$1,000.00	Interest
DEBIT	3/14/2019	Pamela H Ramsey	\$1,000.00	Interest
DEBIT	3/14/2019	Makena B Herget	\$1,000.00	Interest
DEBIT	3/14/2019	Ivy Fasko	\$1,000.00	Interest
DEBIT	3/14/2019	Productions Management LLC	\$1,000.00	Interest
DEBIT	3/14/2019	Greco	\$1,000.00	Interest
DEBIT	3/14/2019	Dunlop	\$1,000.00	Interest
DEBIT	3/14/2019	Aaron Hoke	\$1,000.00	Interest
DEBIT	3/14/2019	David Fairbanks	\$1,000.00	Interest
CHECK	3/14/2019	CHECK 6254 Dominion Energy	\$891.86	Utility
DEBIT	3/14/2019	Sedler	\$660.00	Interest
DEBIT	3/14/2019	Marcalus	\$660.00	Interest
DEBIT	3/14/2019	Perkowski	\$660.00	Interest
DEBIT	3/14/2019	CYBERSRC	\$600.02	Merchant Fee
DEBIT	3/14/2019	INTUIT PYMT	\$2.50	Merchant Fee
CHECK	3/15/2019	CHECK 5576 Jefferson County Sheriffs Office	\$65,756.55	Property Tax
DEBIT	3/15/2019	Divvy T Check Operational Payments	\$20,000.00	Operations
CHECK	3/15/2019	CHECK 6290 UHS	\$3,588.83	Health Insurance
CHECK	3/15/2019	CHECK 6250 Rocky Mtn. Power	\$3,323.59	Utility
CHECK	3/15/2019	CHECK 6291 State Comptroller	\$455.90	Other
CHECK	3/15/2019	CHECK 6227 Landcare	\$392.00	Landscape
CHECK	3/15/2019	CHECK 6166 Grande	\$254.25	Utility
DEBIT	3/15/2019	INTUIT PYMT	\$10.00	Merchant Fee
DEBIT	3/15/2019	INTUIT PYMT	\$8.50	Merchant Fee
DEBIT	3/18/2019	Divvy T Check Operational Payments	\$20,000.00	Operations
DEBIT	3/18/2019	FEDCHEX	\$2,458.00	Interest
DEBIT	3/18/2019	LIBERTASFUNDING	\$2,457.14	Interest

NOAH CORPORATION
PAYMENTS TO CREDITORS IN 90 DAY PRE-PETITION PERIOD

Type	Date	Payee	Amount	Purpose
CHECK	3/18/2019	CHECK 6248 CPS Energy	\$1,565.21	Utility
CHECK	3/18/2019	CHECK 6160 MidAmerican Energy	\$1,249.68	Utility
CHECK	3/18/2019	CHECK 6233 OG&E	\$806.79	Utility
CHECK	3/18/2019	CHECK 6249 Comcast	\$687.07	Utility
CHECK	3/18/2019	CHECK 6280 Kansas Gas Service	\$605.79	Utility
CHECK	3/18/2019	CHECK 6246 City of Plano	\$558.53	Utility
CHECK	3/18/2019	CHECK 6289 City of Fort Worth	\$480.02	Utility
CHECK	3/18/2019	CHECK 6296 Century Link	\$416.54	Utility
DEBIT	3/18/2019	AR DFA REVENUE	\$406.12	Payroll Tax
CHECK	3/18/2019	CHECK 6281 Westar Energy	\$382.32	Utility
DEBIT	3/18/2019	Cybersource	\$358.02	Merchant Fee
CHECK	3/18/2019	CHECK 6276 City of Tulsa	\$316.75	Utility
DEBIT	3/18/2019	AL-DEPT OF REV DIRECT DBT	\$222.36	Payroll Tax
DEBIT	3/18/2019	Dept of Revenue KY	\$220.38	Payroll Tax
CHECK	3/18/2019	CHECK 6194 City of Irving	\$164.25	Utility
DEBIT	3/18/2019	Teresa Miler	\$134.67	Interest
DEBIT	3/18/2019	David Harper	\$94.19	Interest
DEBIT	3/18/2019	Cybersource	\$78.02	Merchant Fee
CHECK	3/18/2019	CHECK 6034 Sloop Fire Extinguisher	\$64.05	Maintenance
CHECK	3/18/2019	CHECK 6285 Kansas Fire Equipment	\$52.41	Maintenance
CHECK	3/18/2019	CHECK 6244 JCW	\$33.67	Utility
CHECK	3/18/2019	CHECK 6195 City of Irving	\$30.03	Utility
DEBIT	3/18/2019	AR DFA REVENUE	\$26.50	Payroll Tax
DEBIT	3/18/2019	INTUIT PYMT	\$14.50	Merchant Fee
CHECK	3/18/2019	CHECK 6196 City of Irving	\$11.90	Utility
DEBIT	3/18/2019	INTUIT PYMT	\$5.50	Merchant Fee
DEBIT	3/19/2019	IRS USATAXPYMT	\$82,591.88	Payroll Tax
DEBIT	3/19/2019	Divvy T Check Operational Payments	\$20,000.00	Operations
DEBIT	3/19/2019	FEDCHEX	\$2,458.00	Interest
DEBIT	3/19/2019	LIBERTASFUNDING	\$2,457.14	Interest
CHECK	3/19/2019	CHECK 6121 Blankenbaker Station	\$1,363.20	Utility
CHECK	3/19/2019	CHECK 5578 Kara Tucker	\$1,301.70	Event Refund
DEBIT	3/19/2019	OPTUM BANK	\$1,283.01	Insurance
DEBIT	3/19/2019	IRS USATAXPYMT	\$1,108.60	Payroll Tax
CHECK	3/19/2019	CHECK 6235 Fairacres Lawn	\$1,000.00	Landscape
CHECK	3/19/2019	CHECK 6293 Kenneth L Maun Tax Advisor	\$909.98	Personal Property Tax
CHECK	3/19/2019	CHECK 6183 ORUD	\$890.15	Utility
CHECK	3/19/2019	CHECK 5588 Department of Financial Institution	\$689.50	Licensing
DEBIT	3/19/2019	OPTUM BANK	\$672.52	Insurance
DEBIT	3/19/2019	8011OHIO-TAXOEWH OH WH	\$493.80	Payroll Tax
DEBIT	3/19/2019	IRS USATAXPYMT	\$473.74	Payroll Tax
CHECK	3/19/2019	CHECK 6260 03/19 Premiere Landscape	\$390.00	Landscape
CHECK	3/19/2019	CHECK 6014 Time Warner Cable	\$371.11	Utility
CHECK	3/19/2019	CHECK 6273 City of Sugar Land	\$264.86	Utility
CHECK	3/19/2019	CHECK 6031 Time Warner Cable	\$218.12	Utility
CHECK	3/19/2019	CHECK 6269 Landscaping for Less	\$200.00	Landscape
CHECK	3/19/2019	CHECK 6292 Illinois Department of Revenue	\$131.31	Sales Tax
CHECK	3/19/2019	CHECK 6286 Sievers Security	\$47.08	Maintenance
DEBIT	3/19/2019	INTUIT PYMT	\$5.50	Merchant Fee
DEBIT	3/20/2019	Sentinel	\$34,138.00	Rent
DEBIT	3/20/2019	Divvy T Check Operational Payments	\$25,000.00	Operations
DEBIT	3/20/2019	Telecheck	\$3,730.98	Merchant Fee
DEBIT	3/20/2019	FEDCHEX	\$2,458.00	Interest
DEBIT	3/20/2019	LIBERTASFUNDING	\$2,457.14	Interest

NOAH CORPORATION
PAYMENTS TO CREDITORS IN 90 DAY PRE-PETITION PERIOD

Type	Date	Payee	Amount	Purpose
DEBIT	3/20/2019	LIBERTASFUNDING	\$2,457.14	Interest
CHECK	3/20/2019	CHECK 6167 TXU Energy	\$1,503.60	Utility
DEBIT	3/20/2019	INTUIT PYMT	\$1,300.00	Merchant Fee
DEBIT	3/20/2019	Metro Utilities	\$1,288.66	Utility
DEBIT	3/20/2019	ORWELL	\$1,103.04	Utility
DEBIT	3/20/2019	Marilyn Bowser	\$1,000.00	Interest
DEBIT	3/20/2019	OK NATURAL GAS	\$602.10	Utility
CHECK	3/20/2019	CHECK 6164 TXU Energy	\$596.96	Utility
DEBIT	3/20/2019	UMR INC CONCENTR FUNDING	\$574.17	Health Insurance
CHECK	3/20/2019	CHECK 6288 Republic Services	\$567.21	Utility
DEBIT	3/20/2019	DIRECTV	\$542.29	Utility
DEBIT	3/20/2019	OK NATURAL GAS	\$448.63	Utility
CHECK	3/20/2019	CHECK 6197 Centerpointe Energy	\$426.79	Utility
CHECK	3/20/2019	CHECK 6163 Comcast	\$421.39	Utility
DEBIT	3/20/2019	DIRECTV	\$410.16	Utility
DEBIT	3/20/2019	AMERICAN-WATER	\$377.51	Utility
DEBIT	3/20/2019	INTUIT PYMT	\$350.00	Merchant Fee
DEBIT	3/20/2019	COMMWLTHOFPA INT	\$348.39	Payroll Tax
DEBIT	3/20/2019	INTUIT PYMT	\$342.00	Payroll Tax
DEBIT	3/20/2019	CPENERGY ENTEX	\$340.89	Utility
DEBIT	3/20/2019	INTUIT PYMT	\$325.00	Merchant Fee
DEBIT	3/20/2019	Cybersource	\$188.73	Merchant Fee
CHECK	3/20/2019	CHECK 6062 Mile Plumbing Company	\$187.50	Maintenance
DEBIT	3/20/2019	COMMWLTHOFPA INT	\$171.10	Payroll Tax
DEBIT	3/20/2019	CITY OF KINGSTON UTILITY	\$153.41	Utility
DEBIT	3/20/2019	INTUIT PYMT	\$10.00	Merchant Fee
DEBIT	3/20/2019	INTUIT PYMT	\$10.00	Merchant Fee
DEBIT	3/20/2019	INTUIT PYMT	\$10.00	Merchant Fee
DEBIT	3/20/2019	INTUIT PYMT	\$8.50	Merchant Fee
DEBIT	3/20/2019	KINGSTON WEB PAYMNT Fee	\$2.95	Merchant Fee
DEBIT	3/21/2019	INVYNC EAST	\$34,615.00	Rent
DEBIT	3/21/2019	Divvy T Check Operational Payments	\$16,000.00	Operations
DEBIT	3/21/2019	FEDCHEX	\$2,458.00	Interest
DEBIT	3/21/2019	LIBERTASFUNDING	\$2,457.14	Interest
CHECK	3/21/2019	CHECK 6295 Pulaski County	\$1,134.90	Personal Property Tax
DEBIT	3/21/2019	COMCAST	\$1,013.50	Utility
CHECK	3/21/2019	CHECK 6120 Spyder Security	\$849.25	Maintenance
DEBIT	3/21/2019	DIRECTV	\$372.37	Utility
DEBIT	3/21/2019	LINKEDIN	\$64.04	Marketing
DEBIT	3/21/2019	Orwell	\$41.36	Utility
DEBIT	3/21/2019	INTUIT PYMT	\$5.50	Merchant Fee
DEBIT	3/22/2019	Cadence	\$67,038.54	Rent
DEBIT	3/22/2019	Naylor Insurance Agency	\$28,242.97	Insurance
DEBIT	3/22/2019	Divvy T Check Operational Payments	\$20,000.00	Operations
CHECK	3/22/2019	CHECK 6336 Advantage Telecom	\$17,151.41	Utility - Bldg. Internet
DEBIT	3/22/2019	Cybersource	\$7,550.00	Merchant Fee
DEBIT	3/22/2019	FEDCHEX	\$2,458.00	Interest
DEBIT	3/22/2019	LIBERTASFUNDING	\$2,457.14	Interest
CHECK	3/22/2019	CHECK 6162 Green Pride Landscape	\$1,800.00	Landscape
DEBIT	3/22/2019	ROCKWOOD ELECTRI PAYMENT	\$882.24	Utility
DEBIT	3/22/2019	Duke Energy	\$463.29	Utility
DEBIT	3/22/2019	TAX PAYMENTS OK TAX	\$423.00	Payroll Tax
DEBIT	3/22/2019	INTUIT PYMT	\$379.00	Merchant Fee
DEBIT	3/22/2019	LINDON CITY	\$245.06	Utility

NOAH CORPORATION
PAYMENTS TO CREDITORS IN 90 DAY PRE-PETITION PERIOD

Type	Date	Payee	Amount	Purpose
DEBIT	3/22/2019	INTUIT PYMT	\$12.50	Merchant Fee
DEBIT	3/22/2019	INTUIT PYMT	\$10.00	Merchant Fee
DEBIT	3/22/2019	BILLMATRIX	\$2.35	Merchant Fee
CHECK	3/25/2019	CHECK 6335 BTJD	\$21,903.01	Legal Fees
DEBIT	3/25/2019	Divvy T Check Operational Payments	\$20,000.00	Operations
CHECK	3/25/2019	CHECK 6331 BTJD	\$7,246.93	Legal Fees
DEBIT	3/25/2019	American Express	\$5,000.00	CC Reimb.-Susanna Bowser
DEBIT	3/25/2019	FEDCHEX	\$2,458.00	Interest
DEBIT	3/25/2019	LIBERTASFUNDING	\$2,457.14	Interest
CHECK	3/25/2019	CHECK 6210 Comcast	\$1,564.58	Utility
CHECK	3/25/2019	CHECK 6300 Liberty Utilities	\$1,370.37	Utility
CHECK	3/25/2019	CHECK 6327 Xcel Energy	\$1,328.71	Utility
CHECK	3/25/2019	CHECK 6153 Dominion Energy Virginia	\$1,028.33	Utility
CHECK	3/25/2019	CHECK 6205 MG&E	\$983.82	Utility
CHECK	3/25/2019	CHECK 6315 OPPD	\$845.42	Utility
CHECK	3/25/2019	CHECK 6206 Alliant Energy	\$651.27	Utility
CHECK	3/25/2019	CHECK 6332 COMED	\$550.00	Utility
DEBIT	3/25/2019	INTUIT PYMT	\$396.00	Merchant Fee
CHECK	3/25/2019	CHECK 6173 Quality Creative Landscape	\$395.00	Landscape
CHECK	3/25/2019	CHECK 6312 PSNC	\$384.85	Utility
CHECK	3/25/2019	CHECK 6161 Janssen Pest Contril	\$131.44	Maintenance
CHECK	3/25/2019	CHECK 6157 Penn Power	\$128.36	Utility
DEBIT	3/25/2019	Intuit *QuickBooks	\$126.81	Merchant Fee
CHECK	3/25/2019	CHECK 6154 HRUBS	\$108.31	Utility
DEBIT	3/25/2019	AQUA	\$98.72	Utility
CHECK	3/25/2019	CHECK 6310 FESCO	\$80.00	Maintenance
DEBIT	3/25/2019	AQUA	\$78.24	Utility
DEBIT	3/25/2019	AQUA	\$71.53	Utility
DEBIT	3/25/2019	AQUA	\$34.71	Utility
DEBIT	3/25/2019	R.I.T.A.	\$11.79	Payroll Tax
DEBIT	3/25/2019	INTUIT PYMT	\$10.00	Merchant Fee
DEBIT	3/25/2019	INTUIT PYMT	\$7.50	Merchant Fee
DEBIT	3/25/2019	INTUIT PYMT	\$4.00	Merchant Fee
DEBIT	3/26/2019	VICTAL LLC	\$28,405.00	Rent
DEBIT	3/26/2019	Divvy T Check Operational Payments	\$25,000.00	Operations
DEBIT	3/26/2019	FEDCHEX	\$2,458.00	Interest
DEBIT	3/26/2019	LIBERTASFUNDING	\$2,457.14	Interest
CHECK	3/26/2019	CHECK 6311 Memphis Light Gas	\$1,862.00	Utility
DEBIT	3/26/2019	LaRayne Day	\$1,500.00	Interest
DEBIT	3/26/2019	Lindsey VanWalkenburg	\$966.00	Interest
CHECK	3/26/2019	CHECK 6334 Rocky Mtn. Power	\$940.52	Utility
CHECK	3/26/2019	CHECK 6223 Comcast	\$857.02	Utility
DEBIT	3/26/2019	INTUIT PYMT	\$789.00	Merchant Fee
DEBIT	3/26/2019	Duke Energy	\$787.12	Utility
CHECK	3/26/2019	CHECK 6316 Kansas Gas Service	\$650.35	Utility
CHECK	3/26/2019	CHECK 6304 AT&T	\$611.56	Utility
CHECK	3/26/2019	CHECK 6338 Duke Energy	\$533.04	Utility
CHECK	3/26/2019	CHECK 6317 KCP&L	\$489.15	Utility
CHECK	3/26/2019	CHECK 6261 03/26 Premiere Landscape	\$460.00	Landscape
DEBIT	3/26/2019	Lindsey VanWalkenburg	\$456.34	Interest
CHECK	3/26/2019	CHECK 6330 Cox Business	\$405.72	Utility
CHECK	3/26/2019	CHECK 5590	\$377.50	Event Refund
CHECK	3/26/2019	CHECK 6186 Landcare	\$330.57	Landscape
CHECK	3/26/2019	CHECK 6268 Landscaping for Less	\$330.00	Landscape

NOAH CORPORATION
PAYMENTS TO CREDITORS IN 90 DAY PRE-PETITION PERIOD

Type	Date	Payee	Amount	Purpose
CHECK	3/26/2019	CHECK 6262 03/26 Premiere Landscape	\$265.00	Landscape
CHECK	3/26/2019	CHECK 6299 Republic Services	\$182.57	Utility
CHECK	3/26/2019	CHECK 6191 Seminole County	\$151.99	Utility
CHECK	3/26/2019	CHECK 6328 Waste Connections of Kansas	\$150.63	Utility
CHECK	3/26/2019	CHECK 6320 Century Link	\$120.60	Utility
CHECK	3/26/2019	CHECK 6145 Home Team Pest Defense	\$102.70	Maintenance
CHECK	3/26/2019	CHECK 6309 Village of Lincolnshire	\$50.72	Utility
DEBIT	3/26/2019	INTUIT PYMT	\$39.00	Merchant Fee
DEBIT	3/26/2019	INTUIT PYMT	\$10.00	Merchant Fee
DEBIT	3/26/2019	INTUIT PYMT	\$10.00	Merchant Fee
DEBIT	3/26/2019	INTUIT PYMT	\$4.00	Merchant Fee
DEBIT	3/26/2019	INTUIT PYMT	\$4.00	Merchant Fee
DEBIT	3/27/2019	Divvy T Check Operational Payments	\$20,000.00	Operations
DEBIT	3/27/2019	FEDCHEX	\$2,458.00	Interest
DEBIT	3/27/2019	LIBERTASFUNDING	\$2,457.14	Interest
CHECK	3/27/2019	CHECK 5589 Oklahoma County Treasurer	\$1,432.60	Licensing
CHECK	3/27/2019	CHECK 6202 LG&E	\$1,156.89	Utility
CHECK	3/27/2019	CHECK 6258 MD Property Services	\$1,083.75	Landscape
DEBIT	3/27/2019	VA DEPT TAXATION TAX	\$539.44	Payroll Tax
CHECK	3/27/2019	CHECK 6192 City of Lake Mary	\$521.83	Utility
DEBIT	3/27/2019	UMR INC CONCENTR FUNDING	\$435.37	Health Insurance
CHECK	3/27/2019	CHECK 6158 CCI	\$433.58	Utility
CHECK	3/27/2019	CHECK 6305 Entouch Systems	\$364.79	Utility
DEBIT	3/27/2019	PIEDMONT	\$239.38	Utility
CHECK	3/27/2019	CHECK 6302 Galveston Water	\$143.41	Utility
CHECK	3/27/2019	CHECK 6301 West Des Moines Water	\$126.75	Utility
DEBIT	3/27/2019	RIGHT NETWORKS	\$16.07	Utility
DEBIT	3/27/2019	INTUIT PYMT	\$5.50	Merchant Fee
DEBIT	3/28/2019	Divvy T Check Operational Payments	\$15,000.00	Operations
CHECK	3/28/2019	CHECK 6342 Goettsch Family Real Estate	\$5,625.09	Property Tax
DEBIT	3/28/2019	FEDCHEX	\$2,458.00	Interest
DEBIT	3/28/2019	LIBERTASFUNDING	\$2,457.14	Interest
CHECK	3/28/2019	CHECK 6303 TXU Energy	\$1,836.37	Utility
CHECK	3/28/2019	CHECK 6318 TXU Energy	\$1,721.11	Utility
CHECK	3/28/2019	CHECK 6306 TXU Energy	\$976.15	Utility
CHECK	3/28/2019	CHECK 6294 City of Auburn Hills	\$973.53	Utility
CHECK	3/28/2019	CHECK 6298 - DTE Energy	\$786.91	Utility
DEBIT	3/28/2019	IRS USATAXPYMT	\$757.63	Payroll Tax
DEBIT	3/28/2019	INTUIT PYMT	\$451.00	Merchant Fee
DEBIT	3/28/2019	INTUIT PYMT	\$431.00	Merchant Fee
DEBIT	3/28/2019	DIRECTV	\$275.59	Utility
CHECK	3/28/2019	CHECK 6221 - Elite Landscape	\$267.00	Landscape
CHECK	3/28/2019	CHECK 6207 -City of Fort Worth	\$213.96	Utility
DEBIT	3/28/2019	IRS USATAXPYMT	\$184.18	Payroll Tax
CHECK	3/28/2019	CHECK 5515 Iowa Secretary of State	\$100.00	Licensing
DEBIT	3/28/2019	LinkedIn	\$64.04	Marketing
DEBIT	3/28/2019	INTUIT PYMT	\$10.00	Merchant Fee
DEBIT	3/28/2019	INTUIT PYMT	\$10.00	Merchant Fee
CHECK	3/28/2019	CHECK 5579 Iowa Secretary of State	\$5.00	Licensing
DEBIT	3/28/2019	INTUIT PYMT	\$5.00	Merchant Fee
DEBIT	3/29/2019	Divvy T Check Operational Payments	\$22,000.00	Operations
DEBIT	3/29/2019	FEDCHEX	\$2,458.00	Interest
DEBIT	3/29/2019	LIBERTASFUNDING	\$2,457.14	Interest
CHECK	3/29/2019	CHECK 6308 - TXU	\$1,836.93	Utility

NOAH CORPORATION
PAYMENTS TO CREDITORS IN 90 DAY PRE-PETITION PERIOD

Type	Date	Payee	Amount	Purpose
CHECK	3/29/2019	CHECK 6319 - TXU Energy	\$1,403.46	Utility
DEBIT	3/29/2019	Lindsey VanWalkenburg	\$966.00	Interest
CHECK	3/29/2019	CHECK 6322 - West Penn Power	\$666.02	Utility
CHECK	3/29/2019	CHECK 6136 - Timberland Landscape	\$598.75	Landscape
CHECK	3/29/2019	CHECK 6142 - Landcare	\$597.74	Landscape
DEBIT	3/29/2019	Lindsey VanWalkenburg	\$456.34	Interest
CHECK	3/29/2019	CHECK 6326 - Xmission	\$353.34	Utility
CHECK	3/29/2019	CHECK 6344 - Century Link	\$298.70	Utility
CHECK	3/29/2019	CHECK 6379 - Comcast	\$282.59	Utility
CHECK	3/29/2019	CHECK 6216 - TXU Energy	\$250.00	Utility
CHECK	3/29/2019	CHECK 6372 - American Electric Power	\$214.92	Utility
CHECK	3/29/2019	CHECK 6352 - Direct TV	\$178.06	Utility
CHECK	3/29/2019	CHECK 6323 - Comcast	\$165.75	Utility
CHECK	3/29/2019	CHECK 6284 - Dynamark Monitoring	\$115.98	Utility
DEBIT	3/29/2019	ATT	\$95.69	Utility
CHECK	3/29/2019	CHECK 6175 - Alabama Alarm Company	\$50.00	Maintenance
CHECK	3/29/2019	CHECK 6369 - San Antonio Water System	\$18.90	Utility
DEBIT	3/29/2019	INTUIT PYMT	\$4.50	Merchant Fee
DEBIT	4/1/2019	Cadence Rent	\$69,913.00	Rent
DEBIT	4/1/2019	Divvy T Check Operational Payments	\$18,000.00	Operations
DEBIT	4/1/2019	Divvy T Check Operational Payments	\$18,000.00	Operations
DEBIT	4/1/2019	Sherrie East	\$7,231.25	Interest
DEBIT	4/1/2019	Judi Navarro	\$4,787.50	Interest
DEBIT	4/1/2019	FEDCHEX-	\$2,458.00	Interest
DEBIT	4/1/2019	LIBERTASFUNDING	\$2,457.14	Interest
CHECK	4/1/2019	CHECK 6356 Alabama Power	\$2,094.47	Utility
CHECK	4/1/2019	CHECK 6361 Entergy	\$1,554.19	Utility
CHECK	4/1/2019	CHECK 6362 Waste Management	\$1,365.03	Garbage
CHECK	4/1/2019	CHECK 6391 Pro Cut Landscaping	\$1,345.00	Landscape
CHECK	4/1/2019	CHECK 5592 Kody Sunday	\$1,240.33	Payroll
CHECK	4/1/2019	CHECK 6333 Columbia Gas	\$1,057.76	Utility
CHECK	4/1/2019	CHECK 5593 Jessica Sunday	\$982.41	Payroll
CHECK	4/1/2019	CHECK 6156 People	\$918.80	Utility
CHECK	4/1/2019	CHECK 6374 TXU Energy	\$908.63	Utility
CHECK	4/1/2019	CHECK 6240 Fairacres Lawn	\$800.00	Landscape
CHECK	4/1/2019	CHECK 6360 North Shore Gas	\$771.23	Utility
CHECK	4/1/2019	CHECK 6314 Waste management	\$697.25	Garbage
CHECK	4/1/2019	CHECK 6211 Reynolds Landscape	\$684.80	Landscape
CHECK	4/1/2019	CHECK 6343 Comcast	\$595.24	Utility
CHECK	4/1/2019	CHECK 5594 Jessica Sunday	\$395.72	Payroll
CHECK	4/1/2019	CHECK 6307 Bright House Network	\$342.14	Utility
CHECK	4/1/2019	CHECK 6365 Cox Business	\$309.83	Utility
CHECK	4/1/2019	CHECK 6371 Waste Management	\$308.88	Garbage
CHECK	4/1/2019	CHECK 6324 Waste Management	\$186.07	Garbage
CHECK	4/1/2019	CHECK 6349 Century Link	\$182.42	Utility
CHECK	4/1/2019	CHECK 6347 Cranberry Township	\$176.55	Utility
CHECK	4/1/2019	CHECK 6346 City of Chandler	\$147.19	Utility
CHECK	4/1/2019	CHECK 6348 Dynamark Monitoring	\$122.94	Utility
CHECK	4/1/2019	CHECK 5454 Adrien Steinwedel	\$9.31	Other
DEBIT	4/1/2019	INTUIT PYMT	\$6.00	Merchant Fee
DEBIT	4/1/2019	INTUIT PYMT	\$5.50	Merchant Fee
DEBIT	4/2/2019	IRS USATAXPYMT	\$84,739.29	Payroll Tax
DEBIT	4/2/2019	UTAH801/297-7703 TAX PAYMNT	\$8,000.36	Payroll Tax
DEBIT	4/2/2019	FEDCHEX-	\$2,458.00	Interest

NOAH CORPORATION
PAYMENTS TO CREDITORS IN 90 DAY PRE-PETITION PERIOD

Type	Date	Payee	Amount	Purpose
DEBIT	4/2/2019	LIBERTASFUNDING	\$2,457.14	Interest
DEBIT	4/2/2019	OPTUM BANK	\$1,153.01	Insurance
CHECK	4/2/2019	CHECK 6366 TXU Energy	\$1,068.89	Utility
CHECK	4/2/2019	CHECK 6193 Granite Landscape	\$933.12	Landscape
CHECK	4/2/2019	CHECK 6270 Landscaping for Less	\$855.00	Landscape
CHECK	4/2/2019	CHECK 6147 Land Care	\$849.17	Landscape
CHECK	4/2/2019	CHECK 6376 Duke Energy	\$737.83	Utility
CHECK	4/2/2019	CHECK 6373 American Electric Power	\$716.02	Utility
DEBIT	4/2/2019	OPTUM BANK	\$672.52	Insurance
CHECK	4/2/2019	CHECK 6339 Consumers Energy	\$667.72	Utility
CHECK	4/2/2019	CHECK 6375 Nicor Gas	\$594.48	Utility
DEBIT	4/2/2019	CYBERSRC	\$593.64	Merchant Fee
CHECK	4/2/2019	CHECK 6185 Landcare	\$575.87	Landscape
CHECK	4/2/2019	CHECK 6353 Johnsons Controls Fire Protection	\$509.50	Utility
CHECK	4/2/2019	CHECK 6364 Public Service Company	\$442.69	Utility
CHECK	4/2/2019	CHECK 6389 FedEx	\$410.08	Shipping
DEBIT	4/2/2019	INTUIT PYMT	\$397.00	Merchant Fee
CHECK	4/2/2019	CHECK 6174 Quality Creative Landscape	\$395.00	Landscape
CHECK	4/2/2019	CHECK 6358 Frontier Communications	\$373.95	Utility
DEBIT	4/2/2019	INTUIT PYMT	\$357.00	Merchant Fee
CHECK	4/2/2019	CHECK 6313 Town of Cary	\$217.99	Utility
CHECK	4/2/2019	CHECK 6351 Town of Fairview	\$177.21	Utility
CHECK	4/2/2019	CHECK 6363 Public Works & Utilities	\$151.77	Utility
CHECK	4/2/2019	CHECK 6390 FedEx	\$136.07	Shipping
CHECK	4/2/2019	CHECK 6381 Quail Springs Office Park	\$117.67	HOA
CHECK	4/2/2019	CHECK 6354 Greenville Water	\$54.64	Utility
CHECK	4/2/2019	CHECK 6377 Sievers Security	\$47.08	Utility
DEBIT	4/2/2019	INTUIT PYMT	\$10.00	Merchant Fee
DEBIT	4/2/2019	INTUIT PYMT	\$10.00	Merchant Fee
DEBIT	4/2/2019	INTUIT PYMT	\$9.00	Merchant Fee
DEBIT	4/2/2019	INTUIT PYMT	\$2.00	Merchant Fee
DEBIT	4/3/2019	Cadence Rent	\$36,072.00	Rent
DEBIT	4/3/2019	Cadence Rent	\$35,549.00	Rent
DEBIT	4/3/2019	Sentinel	\$33,501.00	Rent
DEBIT	4/3/2019	Divvy T Check Operational Payments	\$23,000.00	Operations
DEBIT	4/3/2019	Bapu	\$17,567.79	Linens
DEBIT	4/3/2019	FEDCHEX-	\$2,458.00	Interest
DEBIT	4/3/2019	LIBERTASFUNDING	\$2,457.14	Interest
CHECK	4/3/2019	CHECK 6355 Brookfield Corporate Center	\$2,165.37	HOA
DEBIT	4/3/2019	INTUIT PYMT	\$1,418.00	Merchant Fee
CHECK	4/3/2019	CHECK 6382 Ann Harris Bennet Tax Assessor	\$1,163.50	Personal Property Tax
DEBIT	4/3/2019	SERVICE CHARGES FOR THE MONTH OF MARCH	\$1,039.10	Bank Fees
DEBIT	4/3/2019	UMR INC CONCENTR	\$908.32	Health Insurance
CHECK	4/3/2019	CHECK 6368 Columbia Gas	\$840.51	Utility
DEBIT	4/3/2019	Kent Harker	\$814.58	Interest
DEBIT	4/3/2019	AMERICAN HERITAG	\$704.70	Insurance
CHECK	4/3/2019	CHECK 6422 Dominion Energy	\$666.81	Utility
CHECK	4/3/2019	CHECK 6209 Greenscape	\$607.50	Landscape
CHECK	4/3/2019	CHECK 6425 Dominion Energy	\$540.89	Utility
CHECK	4/3/2019	CHECK 6380 P&E Landscape	\$540.00	Landscape
DEBIT	4/3/2019	COMMWLTHOFPA INT PAEMPLOYTX	\$365.73	Payroll Tax
CHECK	4/3/2019	CHECK 6321 City of South Jordan	\$246.79	Utility
CHECK	4/3/2019	CHECK 6359 Inner Security Systems	\$246.00	Maintenance
CHECK	4/3/2019	CHECK 6325 City of Sugar Land	\$228.00	Utility

NOAH CORPORATION
PAYMENTS TO CREDITORS IN 90 DAY PRE-PETITION PERIOD

Type	Date	Payee	Amount	Purpose
CHECK	4/3/2019	CHECK 5565 AKG Roth	\$15.10	Other
DEBIT	4/3/2019	INTUIT PYMT	\$10.50	Merchant Fee
DEBIT	4/3/2019	INTUIT PYMT	\$10.00	Merchant Fee
DEBIT	4/4/2019	Sentinel	\$34,659.00	Rent
DEBIT	4/4/2019	Divvy T Check Operational Payments	\$18,000.00	Operations
DEBIT	4/4/2019	VICTOR E. GRIJALVA SR. TRUST	\$17,500.00	Interest
CHECK	4/4/2019	CHECK 6384 CFB ISD	\$2,521.45	Personal Property Tax
DEBIT	4/4/2019	FEDCHEX-	\$2,458.00	Interest
DEBIT	4/4/2019	LIBERTASFUNDING	\$2,457.14	Interest
CHECK	4/4/2019	CHECK 6399 SRP	\$1,243.39	Utility
CHECK	4/4/2019	CHECK 6396 PNM	\$784.29	Utility
CHECK	4/4/2019	CHECK 6345 Chandler Airport Center	\$732.91	HOA
DEBIT	4/4/2019	INTUIT PYMT	\$713.00	Merchant Fee
CHECK	4/4/2019	CHECK 6395 New Mexico Gas Company	\$353.74	Utility
DEBIT	4/4/2019	IRS USATAXPYMT	\$332.03	Payroll Tax
CHECK	4/4/2019	CHECK 6408 Birmingham Water Works	\$329.75	Utility
DEBIT	4/4/2019	Time Warner Cable	\$269.41	Utility
CHECK	4/4/2019	CHECK 6415 IML Security Supply	\$171.70	Maintenance
DEBIT	4/4/2019	INTUIT PYMT	\$129.00	Merchant Fee
DEBIT	4/4/2019	INTUIT PYMT	\$80.00	Merchant Fee
DEBIT	4/4/2019	INTUIT PYMT	\$10.00	Merchant Fee
DEBIT	4/4/2019	INTUIT PYMT	\$10.00	Merchant Fee
DEBIT	4/4/2019	INTUIT PYMT	\$10.00	Merchant Fee
DEBIT	4/4/2019	INTUIT PYMT	\$8.00	Merchant Fee
DEBIT	4/5/2019	Divvy T Check Operational Payments	\$20,000.00	Operations
DEBIT	4/5/2019	Wedding Wire	\$5,000.00	Marketing
DEBIT	4/5/2019	CYBERSRC	\$3,834.00	Merchant Fee
DEBIT	4/5/2019	FEDCHEX-	\$2,458.00	Interest
DEBIT	4/5/2019	LIBERTASFUNDING	\$2,457.14	Interest
CHECK	4/5/2019	CHECK 6421 San Antonio Water Systems	\$2,023.92	Utility
DEBIT	4/5/2019	HIGH-POINT-UTIL	\$1,812.34	Utility
DEBIT	4/5/2019	IL DEPT OF REVEN	\$1,593.83	Payroll Tax
CHECK	4/5/2019	CHECK 6405 Laurens Electric	\$1,502.06	Utility
DEBIT	4/5/2019	CYBERSRC	\$539.00	Merchant Fee
CHECK	4/5/2019	CHECK 6417 Illuminating Company	\$525.06	Utility
CHECK	4/5/2019	CHECK 6412 Duke Energy	\$510.02	Utility
DEBIT	4/5/2019	PIEDMONT N. G.	\$426.76	Utility
CHECK	4/5/2019	CHECK 5591 Kelsey Pitts	\$300.00	Event Refund
DEBIT	4/5/2019	OR REVENUE DEPT	\$222.90	Payroll Tax
CHECK	4/5/2019	CHECK 6350 Fire Star Alarm	\$190.00	Maintenance
CHECK	4/5/2019	CHECK 6400 City of Charlotte	\$157.86	Utility
DEBIT	4/5/2019	CYBERSRC	\$135.67	Merchant Fee
CHECK	4/5/2019	CHECK 6367 Landscaping for Less	\$116.00	Landscape
CHECK	4/5/2019	CHECK 6370 Fire Star Alarm	\$116.00	Utility
CHECK	4/5/2019	CHECK 6357 Fire Star Alarm	\$116.00	Utility
CHECK	4/5/2019	CHECK 6423 CTMA	\$29.75	Utility
CHECK	4/5/2019	CHECK 6394 HAB-DLT	\$5.01	Dues & Sub.
DEBIT	4/5/2019	INTUIT PYMT	\$3.00	Merchant Fee
DEBIT	4/8/2019	VICLIN INVESTMENTS LLC	\$37,682.08	Rent
DEBIT	4/8/2019	Divvy T Check Operational Payments	\$20,000.00	Operations
DEBIT	4/8/2019	UMR INC CONCENTR UMR FEES	\$19,441.90	Health Insurance
DEBIT	4/8/2019	Divvy T Check Operational Payments	\$10,000.00	Operations
CHECK	4/8/2019	CHECK 6406 Mendenall Owner's Association	\$2,489.98	HOA
DEBIT	4/8/2019	FEDCHEX-	\$2,458.00	Interest

NOAH CORPORATION
PAYMENTS TO CREDITORS IN 90 DAY PRE-PETITION PERIOD

Type	Date	Payee	Amount	Purpose
DEBIT	4/8/2019	LIBERTASFUNDING	\$2,457.14	Interest
CHECK	4/8/2019	CHECK 5599 Gazelem Schobert	\$1,837.94	Payroll
CHECK	4/8/2019	CHECK 6401 Stratus Building Solutions	\$1,385.65	Janitorial Services
CHECK	4/8/2019	CHECK 6432 Landcare	\$1,053.85	Landscape
DEBIT	4/8/2019	American Express	\$1,000.00	CC Reimb.-Susanna Bowser
CHECK	4/8/2019	CHECK 6214 Landcare	\$867.92	Landscape
CHECK	4/8/2019	CHECK 6168 Granite Landscape	\$811.88	Landscape
CHECK	4/8/2019	CHECK 6393 Scott Chareleston	\$783.56	Reimbursement
CHECK	4/8/2019	CHECK 6397 ABCWUA	\$747.41	Utility
CHECK	4/8/2019	CHECK 6222 Elite Landscape	\$600.00	Landscape
CHECK	4/8/2019	CHECK 6190 Landcare	\$557.60	Landscape
CHECK	4/8/2019	CHECK 6220 Elite Landscape	\$450.00	Landscape
CHECK	4/8/2019	CHECK 6398 DTE Energy	\$437.57	Utility
DEBIT	4/8/2019	CYBERSRC	\$418.00	Merchant Fee
DEBIT	4/8/2019	CYBERSRC	\$400.00	Merchant Fee
CHECK	4/8/2019	CHECK 6431 Cogency	\$323.76	Dues & Sub.
CHECK	4/8/2019	CHECK 6418 Cox Business	\$292.35	Utility
CHECK	4/8/2019	CHECK 6403 Grande	\$258.06	Utility
CHECK	4/8/2019	CHECK 6410 Weston Mud	\$230.02	Utility
CHECK	4/8/2019	CHECK 6416 Direct TV	\$228.60	Utility
CHECK	4/8/2019	CHECK 6404 Direct TV	\$202.19	Utility
CHECK	4/8/2019	CHECK 6427 Cogency	\$160.00	Dues & Sub.
CHECK	4/8/2019	CHECK 6428 Cogency	\$53.33	Dues & Sub.
DEBIT	4/8/2019	INTUIT PYMT	\$4.00	Merchant Fee
DEBIT	4/8/2019	INTUIT PYMT	\$4.00	Merchant Fee
DEBIT	4/9/2019	Divvy T Check Operational Payments	\$18,000.00	Operations
CHECK	4/9/2019	CHECK 6433 Docusign	\$3,358.18	Dues & Subscriptions
CHECK	4/9/2019	CHECK 6383 Office of City Treasurer	\$3,198.72	Personal Property Tax
DEBIT	4/9/2019	FEDCHEX-	\$2,458.00	Interest
DEBIT	4/9/2019	LIBERTASFUNDING	\$2,457.14	Interest
CHECK	4/9/2019	CHECK 6180 Greenpride Landscape	\$1,650.00	Landscape
CHECK	4/9/2019	CHECK 6426 Cogency	\$1,596.67	Dues & Subscriptions
DEBIT	4/9/2019	OK NATURAL GAS	\$664.57	Utility
CHECK	4/9/2019	CHECK 6420 City of Richardson	\$625.32	Utility
CHECK	4/9/2019	CHECK 6411 City of Irving	\$211.08	Utility
DEBIT	4/9/2019	IRS	\$193.80	Payroll Tax
CHECK	4/9/2019	CHECK 6430 Cogency	\$80.00	Dues & Sub.
CHECK	4/9/2019	CHECK 6429 Cogency	\$53.33	Dues & Sub.
CHECK	4/9/2019	CHECK 6419 JCW	\$44.95	Utility
DEBIT	4/9/2019	INTUIT PYMT	\$2.50	Merchant Fee
DEBIT	4/9/2019	INTUIT PYMT	\$2.00	Merchant Fee
DEBIT	4/10/2019	Divvy T Check Operational Payments	\$16,000.00	Operations
CHECK	4/10/2019	CHECK 5596 Telicia Evil	\$4,633.00	Event Refund
DEBIT	4/10/2019	FEDCHEX-	\$2,458.00	Interest
DEBIT	4/10/2019	LIBERTASFUNDING	\$2,457.14	Interest
DEBIT	4/10/2019	UMR INC CONCENTR	\$2,091.51	Health Insurance
CHECK	4/10/2019	CHECK 6172 T-Squared landscape	\$1,260.00	Landscape
DEBIT	4/10/2019	Duke Energy	\$1,226.30	Utility
CHECK	4/10/2019	CHECK 6424 Star Treatment Valet	\$1,160.00	Valet - Sugar Land
CHECK	4/10/2019	CHECK 6414 Memphis Light Gas	\$1,017.39	Utility
DEBIT	4/10/2019	ORWELL	\$912.19	Utility
CHECK	4/10/2019	CHECK 6392 Don Wagner	\$736.60	Reimbursement
DEBIT	4/10/2019	IRS USATAXPYMT	\$560.22	Payroll Tax
CHECK	4/10/2019	CHECK 6407 Piedmont Natual Gas	\$426.76	Utility

NOAH CORPORATION
PAYMENTS TO CREDITORS IN 90 DAY PRE-PETITION PERIOD

Type	Date	Payee	Amount	Purpose
DEBIT	4/10/2019	AMERICAN-WATER	\$331.37	Utility
DEBIT	4/10/2019	COX COMM	\$282.22	Payroll Tax
DEBIT	4/10/2019	INTUIT PYMT	\$198.00	Merchant Fee
DEBIT	4/10/2019	INTUIT PYMT	\$10.00	Merchant Fee
DEBIT	4/10/2019	INTUIT PYMT	\$2.00	Merchant Fee
DEBIT	4/11/2019	Divvy T Check Operational Payments	\$7,000.00	Operations
DEBIT	4/11/2019	DEPOSITED ITEM RETURNED	\$3,500.00	Chargeback
DEBIT	4/11/2019	FEDCHEX-	\$2,458.00	Interest
DEBIT	4/11/2019	LIBERTASFUNDING	\$2,457.14	Interest
CHECK	4/11/2019	CHECK 6238 Fairacres Lawn	\$850.00	Landscape
DEBIT	4/11/2019	INTUIT PYMT	\$500.00	Merchant Fee
CHECK	4/11/2019	CHECK 6409 Alabama Alarm	\$50.00	Utility
DEBIT	4/11/2019	Orwell	\$34.21	Utility
DEBIT	4/11/2019	INTUIT PYMT	\$10.00	Merchant Fee
DEBIT	4/11/2019	INTUIT PYMT	\$4.50	Merchant Fee
DEBIT	4/12/2019	Divvy T Check Operational Payments	\$15,000.00	Operations
CHECK	4/12/2019	CHECK 6468 Rocky Mtn. Power	\$3,222.93	Utility
DEBIT	4/12/2019	FEDCHEX-	\$2,458.00	Interest
DEBIT	4/12/2019	LIBERTASFUNDING	\$2,457.14	Interest
CHECK	4/12/2019	CHECK 6466 CPS Energy	\$1,489.18	Utility
CHECK	4/12/2019	CHECK 6150 Fine Edge Lawn	\$1,250.00	Landscape
CHECK	4/12/2019	CHECK 6165 Granite Landscape	\$1,190.75	Landscape
CHECK	4/12/2019	CHECK 6443 CCI	\$867.24	Utility
CHECK	4/12/2019	CHECK 6463 OG&E	\$714.69	Utility
DEBIT	4/12/2019	DEPOSITED ITEM RETURNED	\$595.00	Chargeback
DEBIT	4/12/2019	CYBERSRC	\$360.00	Merchant Fee
DEBIT	4/12/2019	INTUIT PYMT	\$3.50	Merchant Fee
DEBIT	4/15/2019	Cadence Rent	\$33,987.00	Rent
DEBIT	4/15/2019	Divvy T Check Operational Payments	\$20,000.00	Operations
CHECK	4/15/2019	CHECK 6529 BTJD	\$18,085.86	Legal Fees
CHECK	4/15/2019	CHECK 6480 UHS	\$5,509.42	Health Insurance
DEBIT	4/15/2019	NC DEPT REVENUE TAX PYMT	\$2,982.00	Payroll Tax
DEBIT	4/15/2019	STATE OF AZ UIT SWEB PYMNT	\$2,912.48	Payroll Tax
DEBIT	4/15/2019	FEDCHEX-	\$2,458.00	Interest
DEBIT	4/15/2019	LIBERTASFUNDING	\$2,457.14	Interest
DEBIT	4/15/2019	DTE ELECTRIC	\$2,348.62	Utility
DEBIT	4/15/2019	CODPTOFREV CO.GO	\$1,562.00	Payroll Tax
CHECK	4/15/2019	CHECK 6475 Metro Utilities	\$1,117.53	Utility
DEBIT	4/15/2019	KYEmploymt	\$1,086.88	Payroll Tax
CHECK	4/15/2019	CHECK 6444 Midamerican Energy	\$1,030.13	Utility
CHECK	4/15/2019	CHECK 6476 Comcast	\$1,003.50	Utility
CHECK	4/15/2019	CHECK 6441 Dominion Energy Virginia	\$806.28	Utility
CHECK	4/15/2019	CHECK 6452 Rockwood Electric Company	\$783.44	Utility
CHECK	4/15/2019	CHECK 6442 Penn Power	\$626.75	Utility
CHECK	4/15/2019	CHECK 6459 State Systems Inc.	\$550.00	Maintenance
CHECK	4/15/2019	CHECK 6474 Westar Energy	\$542.27	Utility
CHECK	4/15/2019	CHECK 6473 Kansas Gas Service	\$507.73	Utility
CHECK	4/15/2019	CHECK 6457 Direct TV	\$227.23	Utility
CHECK	4/15/2019	CHECK 6462 Direct TV	\$222.88	Utility
CHECK	4/15/2019	CHECK 6467 Direct TV	\$222.47	Utility
CHECK	4/15/2019	CHECK 6455 Direct TV	\$213.80	Utility
CHECK	4/15/2019	CHECK 6454 Direct TV	\$181.92	Utility
CHECK	4/15/2019	CHECK 6472 Direct TV	\$172.84	Utility
CHECK	4/15/2019	CHECK 6464 Water One	\$91.27	Utility

NOAH CORPORATION
PAYMENTS TO CREDITORS IN 90 DAY PRE-PETITION PERIOD

Type	Date	Payee	Amount	Purpose
DEBIT	4/15/2019	INTUIT PYMT	\$7.00	Merchant Fee
DEBIT	4/15/2019	INTUIT PYMT	\$5.00	Merchant Fee
DEBIT	4/15/2019	PAYPAL	\$0.13	Merchant Fee
DEBIT	4/16/2019	IRS USATAXPYMT	\$86,573.67	Payroll Tax
DEBIT	4/16/2019	Divvy T Check Operational Payments	\$8,000.00	Operations
DEBIT	4/16/2019	ESC OF NC	\$2,719.13	Payroll Tax
DEBIT	4/16/2019	FEDCHEX-	\$2,458.00	Interest
DEBIT	4/16/2019	LIBERTASFUNDING	\$2,457.14	Interest
DEBIT	4/16/2019	IL DEPT OF REVENUE	\$2,402.10	Payroll Tax
CHECK	4/16/2019	CHECK 6445 Stratus Building Solutions	\$1,385.65	Janitorial Services
CHECK	4/16/2019	CHECK 6477 Comcast	\$1,374.14	Utility
CHECK	4/16/2019	CHECK 6448 T-Squared Landcape	\$1,350.00	Landscape
CHECK	4/16/2019	CHECK 6482 04/16 A Straight Up Fence	\$875.00	Maintenance
DEBIT	4/16/2019	AR DFA REVENUE	\$837.30	Payroll Tax
CHECK	4/16/2019	CHECK 6453 OG&E	\$715.28	Utility
CHECK	4/16/2019	CHECK 6465 City of Plano	\$653.36	Utility
CHECK	4/16/2019	CHECK 6447 Comcast	\$454.03	Utility
CHECK	4/16/2019	CHECK 6440 BFPE	\$360.00	Maintenance
DEBIT	4/16/2019	AL-DEPT OF REV	\$330.61	Payroll Tax
CHECK	4/16/2019	CHECK 6461 Cana Communications	\$300.00	Utility
CHECK	4/16/2019	CHECK 6439 Edwards Electronic Systems	\$278.98	Maintenance
DEBIT	4/16/2019	GA DEPT OF LABOR UI	\$256.50	Payroll Tax
CHECK	4/16/2019	CHECK 6460 Miles Plumbing Company	\$200.00	Maintenance
CHECK	4/16/2019	CHECK 6449 Greenville Water	\$180.42	Utility
CHECK	4/16/2019	CHECK 6438 Kroger Check	\$126.97	Payroll
CHECK	4/16/2019	CHECK 6479 Kingston Water Department	\$74.27	Utility
DEBIT	4/16/2019	INTUIT PYMT	\$11.50	Merchant Fee
DEBIT	4/16/2019	INTUIT PYMT	\$5.00	Merchant Fee
DEBIT	4/17/2019	Divvy T Check Operational Payments	\$23,000.00	Operations
CHECK	4/17/2019	CHECK 6278 Olson Restoration	\$3,414.91	Maintenance
DEBIT	4/17/2019	FEDCHEX-	\$2,458.00	Interest
DEBIT	4/17/2019	LIBERTASFUNDING	\$2,457.14	Interest
DEBIT	4/17/2019	OPTUM BANK	\$1,741.76	Insurance
DEBIT	4/17/2019	8011OHIO-TAXOEWH	\$1,509.66	Payroll Tax
DEBIT	4/17/2019	NE WORKFORCE DEV TAX PAYMNT	\$449.94	Payroll Tax
CHECK	4/17/2019	CHECK 6470 City of Sugar Land	\$275.58	Utility
CHECK	4/17/2019	CHECK 6378 Mentor Area Chamber of Commerce	\$270.00	Dues & Sub.
DEBIT	4/17/2019	UMR INC CONCENTR	\$230.05	Health Insurance
DEBIT	4/17/2019	8006OHIO-TAXOSWH OH	\$144.26	Payroll Tax
DEBIT	4/17/2019	INTUIT PYMT	\$129.00	Merchant Fee
CHECK	4/17/2019	CHECK 6478 Galveston County	\$120.77	Utility
DEBIT	4/17/2019	INTUIT PYMT	\$16.00	Merchant Fee
CHECK	4/17/2019	CHECK 5603 City of Kingston	\$15.00	Utility
CHECK	4/17/2019	CHECK 5604 Tennessee Dept. of Revenue	\$15.00	Vendor License
DEBIT	4/17/2019	INTUIT PYMT	\$10.00	Merchant Fee
DEBIT	4/18/2019	CHECK 5601 Charlotte, North Carolina	\$38,743.66	Propert Tax - Charlotte
DEBIT	4/18/2019	Divvy T Check Operational Payments	\$18,000.00	Operations
CHECK	4/18/2019	CHECK 6484 Advantage Telecom	\$11,250.80	Utility - Bldg. Internet
CHECK	4/18/2019	CHECK 6437 HN	\$3,987.96	Legal Fees
CHECK	4/18/2019	CHECK 6434 Docusign	\$3,358.18	Dues & Subscriptions
DEBIT	4/18/2019	FEDCHEX-	\$2,458.00	Interest
DEBIT	4/18/2019	LIBERTASFUNDING	\$2,457.14	Interest
DEBIT	4/18/2019	Lund Family Trust	\$1,850.00	Interest
DEBIT	4/18/2019	DEPOSITED ITEM RETURNED	\$1,089.00	Chargeback

NOAH CORPORATION
PAYMENTS TO CREDITORS IN 90 DAY PRE-PETITION PERIOD

Type	Date	Payee	Amount	Purpose
DEBIT	4/18/2019	Greco	\$1,000.00	Interest
CHECK	4/18/2019	CHECK 6492 Peoples	\$873.61	Utility
CHECK	4/18/2019	CHECK 6504 MG&E	\$775.68	Utility
CHECK	4/18/2019	CHECK 6481 Alabama Department of Revenue	\$503.54	Sales Tax
CHECK	4/18/2019	CHECK 6513 Kansas Gas Service	\$449.02	Utility
DEBIT	4/18/2019	INTUIT PYMT	\$422.00	Merchant Fee
CHECK	4/18/2019	CHECK 6471 04/18 Professional Systems	\$420.00	Maintenance
CHECK	4/18/2019	CHECK 6522 Century Link	\$396.76	Utility
CHECK	4/18/2019	CHECK 6519 Oklahoma Natural Gas	\$388.46	Utility
DEBIT	4/18/2019	COMMWLTHOFPA INT PAEMPLOYTX	\$361.63	Payroll Tax
DEBIT	4/18/2019	NHES QTRLY REPS 266926 CCD ID: 2026000618	\$355.39	Payroll Tax
CHECK	4/18/2019	CHECK 6508 PSNC	\$248.09	Utility
CHECK	4/18/2019	CHECK 6520 City of Tulsa	\$230.05	Utility
CHECK	4/18/2019	CHECK 6517 Century Link	\$120.60	Utility
CHECK	4/18/2019	CHECK 6490 HRUBS	\$93.09	Utility
CHECK	4/18/2019	CHECK 6446 TXU Energy	\$39.50	Utility
DEBIT	4/18/2019	CYBERSRC	\$39.00	Merchant Fee
DEBIT	4/18/2019	INTUIT PYMT	\$10.00	Merchant Fee
DEBIT	4/18/2019	INTUIT PYMT	\$7.00	Merchant Fee
DEBIT	4/19/2019	Divvy T Check Operational Payments	\$15,000.00	Operations
DEBIT	4/19/2019	MI Business Tax Payment	\$3,220.86	Payroll Tax
DEBIT	4/19/2019	FEDCHEX-	\$2,458.00	Interest
DEBIT	4/19/2019	LIBERTASFUNDING	\$2,457.14	Interest
DEBIT	4/19/2019	Dan Naylor	\$2,000.00	Interest
DEBIT	4/19/2019	Dryjas Holdings LLC	\$1,000.00	Interest
CHECK	4/19/2019	CHECK 6498 AT&T	\$612.17	Utility
CHECK	4/19/2019	CHECK 6485 Liberty Utilities	\$532.17	Utility
CHECK	4/19/2019	CHECK 6491 Direct TV	\$243.32	Utility
CHECK	4/19/2019	CHECK 6500 Direct TV	\$218.94	Utility
CHECK	4/19/2019	CHECK 6506 Aqua OH	\$178.99	Utility
CHECK	4/19/2019	CHECK 6507 Aqua OH	\$135.07	Utility
DEBIT	4/19/2019	INTUIT PYMT	\$80.00	Merchant Fee
DEBIT	4/19/2019	INTUIT PYMT	\$10.00	Merchant Fee
DEBIT	4/19/2019	INTUIT PYMT	\$4.50	Merchant Fee
DEBIT	4/22/2019	Kavniya	\$33,334.00	Wed Development
DEBIT	4/22/2019	Divvy T Check Operational Payments	\$20,000.00	Operations
DEBIT	4/22/2019	Divvy T Check Operational Payments	\$17,996.66	Operations
CHECK	4/22/2019	CHECK 6537 Town of Bedford	\$13,161.94	Property Tax
CHECK	4/22/2019	CHECK 6536 Town of Bedford	\$10,241.26	Property Tax
CHECK	4/22/2019	CHECK 6524 P&E	\$2,625.37	Utility
DEBIT	4/22/2019	FEDCHEX-	\$2,458.00	Interest
DEBIT	4/22/2019	LIBERTASFUNDING	\$2,457.14	Interest
CHECK	4/22/2019	CHECK 6514 Granite Landscape	\$1,732.00	Landscape
CHECK	4/22/2019	CHECK 6525 Traditions Landscape	\$1,729.63	Landscape
CHECK	4/22/2019	CHECK 6523 Xcel Energy	\$1,170.81	Utility
DEBIT	4/22/2019	Marilyn Bowser	\$1,000.00	Interest
CHECK	4/22/2019	CHECK 6469 Star Treatment Valet	\$840.00	Valet - Sugar Land
DEBIT	4/22/2019	Telecheck	\$475.35	Merchant Fee
CHECK	4/22/2019	CHECK 6495 City of Fort Worth	\$460.06	Utility
CHECK	4/22/2019	CHECK 6283 McDaniel Company	\$279.50	Maintenance
CHECK	4/22/2019	CHECK 6528 Dynamark Monitoring	\$150.98	Utility
CHECK	4/22/2019	CHECK 6527 Dynamark Monitoring	\$150.98	Utility
DEBIT	4/22/2019	INTUIT PYMT	\$129.00	Merchant Fee
CHECK	4/22/2019	CHECK 6505 LCDU	\$89.11	Utility

NOAH CORPORATION
PAYMENTS TO CREDITORS IN 90 DAY PRE-PETITION PERIOD

Type	Date	Payee	Amount	Purpose
CHECK	4/22/2019	CHECK 6450 Alabama Alarm Compnay	\$50.00	Utility
DEBIT	4/22/2019	INTUIT PYMT	\$10.00	Merchant Fee
DEBIT	4/22/2019	INTUIT PYMT	\$8.50	Merchant Fee
DEBIT	4/22/2019	INTUIT PYMT	\$5.00	Merchant Fee
DEBIT	4/23/2019	IRS	\$29,155.57	Payroll Tax
DEBIT	4/23/2019	Travelers INS PREM	\$21,666.87	Insurance
DEBIT	4/23/2019	ODJFS	\$2,487.01	Payroll Tax
DEBIT	4/23/2019	FEDCHEX-	\$2,458.00	Interest
DEBIT	4/23/2019	LIBERTASFUNDING	\$2,457.14	Interest
DEBIT	4/23/2019	R.I.T.A.	\$1,836.08	Payroll Tax
CHECK	4/23/2019	CHECK 6535 Vanguard Security	\$720.00	Maintenance
CHECK	4/23/2019	CHECK 6487 Duke Energy	\$492.07	Utility
CHECK	4/23/2019	CHECK 6456 Centerpoint Energy	\$396.36	Utility
CHECK	4/23/2019	CHECK 5598 Sundae Graves	\$300.00	Event Refund
CHECK	4/23/2019	CHECK 6515 Vanguard Security	\$180.00	Maintenance
DEBIT	4/23/2019	IRS USATAXPYMT	\$136.48	Payroll Tax
CHECK	4/23/2019	CHECK 5602 Ohio Dept. of Taxation	\$75.00	Vendor License
CHECK	4/23/2019	CHECK 6533 New Mexico Taxation	\$50.00	Vendor License
DEBIT	4/23/2019	INTUIT PYMT	\$14.50	Merchant Fee
DEBIT	4/23/2019	INTUIT PYMT	\$6.00	Merchant Fee
DEBIT	4/24/2019	Divvy T Check Operational Payments	\$18,242.66	Operations
CHECK	4/24/2019	CHECK 6541 Waste Management	\$7,929.24	Garbage - All Buildings
DEBIT	4/24/2019	FEDCHEX-	\$2,458.00	Interest
DEBIT	4/24/2019	LIBERTASFUNDING	\$2,457.14	Interest
DEBIT	4/24/2019	CYBERSRC	\$1,700.00	Merchant Fee
DEBIT	4/24/2019	TAX PAYMENTS	\$835.00	Payroll Tax
CHECK	4/24/2019	CHECK 6509 City of Naperville	\$604.56	Utility
CHECK	4/24/2019	CHECK 6483 Valley Office Supplies	\$508.36	Office Supplies
CHECK	4/24/2019	CHECK 6501 City of Lake Mary	\$472.88	Utility
DEBIT	4/24/2019	INTUIT PYMT	\$396.00	Merchant Fee
DEBIT	4/24/2019	CYBERSRC	\$303.00	Merchant Fee
DEBIT	4/24/2019	UMR INC CONCENTR	\$277.86	Health Insurance
CHECK	4/24/2019	CHECK 6502 TXU Energy	\$171.19	Utility
DEBIT	4/24/2019	INTUIT PYMT	\$10.00	Merchant Fee
DEBIT	4/24/2019	INTUIT PYMT	\$4.00	Merchant Fee
DEBIT	4/25/2019	Divvy T Check Operational Payments	\$7,000.00	Operations
CHECK	4/25/2019	CHECK 6510	\$2,781.55	HOA
DEBIT	4/25/2019	FEDCHEX-	\$2,458.00	Interest
DEBIT	4/25/2019	LIBERTASFUNDING	\$2,457.14	Interest
DEBIT	4/25/2019	KSDEPTOFREVENUE	\$2,032.00	Payroll Tax
CHECK	4/25/2019	CHECK 6562 Granite Landscape	\$2,002.63	Landscape
CHECK	4/25/2019	CHECK 6451 International Park Owner's Association	\$1,818.69	HOA
CHECK	4/25/2019	CHECK 6550 Louisville Water Company	\$1,045.81	Utility
CHECK	4/25/2019	CHECK 6521 Rocky Mtn. Power	\$946.12	Utility
CHECK	4/25/2019	CHECK 6518 Star Treatment Valet	\$900.00	Valet - Sugar Land
CHECK	4/25/2019	CHECK 6548 COMED	\$779.58	Utility
CHECK	4/25/2019	CHECK 6556 KCP&L	\$764.66	Utility
CHECK	4/25/2019	CHECK 6512 OPPD	\$727.22	Utility
DEBIT	4/25/2019	INTUIT PYMT	\$680.00	Merchant Fee
CHECK	4/25/2019	CHECK 6558 West Penn Power	\$532.96	Utility
DEBIT	4/25/2019	INTUIT PYMT	\$470.00	Merchant Fee
DEBIT	4/25/2019	INTUIT PYMT	\$389.00	Merchant Fee
CHECK	4/25/2019	CHECK 6534 Kentucky Department of Revenue	\$350.00	Sales Tax
CHECK	4/25/2019	CHECK 6554 City of Oklaahaoma	\$243.35	Utility

NOAH CORPORATION
PAYMENTS TO CREDITORS IN 90 DAY PRE-PETITION PERIOD

Type	Date	Payee	Amount	Purpose
CHECK	4/25/2019	CHECK 6551 City Treasurer	\$214.36	Utility
CHECK	4/25/2019	CHECK 6555 Direct TV	\$201.86	Utility
CHECK	4/25/2019	CHECK 6493 West Des Moines Water Works	\$189.32	Utility
CHECK	4/25/2019	CHECK 6559 Comcast	\$165.75	Utility
CHECK	4/25/2019	CHECK 6489 Cox Business	\$150.12	Utility
DEBIT	4/25/2019	INTUIT PYMT	\$150.00	Merchant Fee
CHECK	4/25/2019	CHECK 6546 Seminole County	\$99.69	Utility
CHECK	4/25/2019	CHECK 6549 Village of lincolnshire	\$55.79	Utility
DEBIT	4/25/2019	INTUIT PYMT	\$10.00	Merchant Fee
DEBIT	4/25/2019	INTUIT PYMT	\$10.00	Merchant Fee
DEBIT	4/25/2019	INTUIT PYMT	\$10.00	Merchant Fee
DEBIT	4/25/2019	INTUIT PYMT	\$10.00	Merchant Fee
DEBIT	4/25/2019	INTUIT PYMT	\$4.00	Merchant Fee
CHECK	4/26/2019	CHECK 6435 Docusign	\$3,358.18	Dues & Subscriptions
CHECK	4/26/2019	CHECK 6539 Douglas County Treasurer	\$2,882.88	Personal Property Tax
DEBIT	4/26/2019	FEDCHEX-	\$2,458.00	Interest
DEBIT	4/26/2019	LIBERTASFUNDING	\$2,457.14	Interest
CHECK	4/26/2019	CHECK 6497 South Carolina Dept. of Revenue	\$1,859.33	Personal Property Tax
CHECK	4/26/2019	CHECK 6540 Law office of Scott Long	\$825.00	Legal Fees
CHECK	4/26/2019	CHECK 6486 Duke Energy	\$748.17	Utility
CHECK	4/26/2019	CHECK 6552 Duke Energy	\$605.87	Utility
CHECK	4/26/2019	CHECK 6516 Consumers Energy	\$489.91	Utility
CHECK	4/26/2019	CHECK 5612 Sherry Roberson	\$482.00	Event Refund
CHECK	4/26/2019	CHECK 6545 Entouch Systems	\$254.04	Utility
CHECK	4/26/2019	CHECK 6561 Waste Connections of Kansas	\$176.22	Utility
CHECK	4/26/2019	CHECK 6544 Greenville Water	\$54.64	Utility
DEBIT	4/26/2019	INTUIT PYMT	\$7.00	Merchant Fee
DEBIT	4/29/2019	BARTLEY NE BEN	\$39,882.29	Rent
DEBIT	4/29/2019	Divvy T Check Operational Payments	\$20,000.00	Operations
DEBIT	4/29/2019	Bapu	\$14,161.90	Linens
DEBIT	4/29/2019	FedEx	\$4,294.69	Shipping
CHECK	4/29/2019	CHECK 6542 UNUM	\$3,740.83	Insurance
DEBIT	4/29/2019	FEDCHEX-	\$2,458.00	Interest
DEBIT	4/29/2019	LIBERTASFUNDING	\$2,457.14	Interest
DEBIT	4/29/2019	MI UIA TAX	\$2,370.51	Payroll Tax
DEBIT	4/29/2019	NC DEPT REVENUE	\$2,273.08	Payroll Tax
DEBIT	4/29/2019	TAX_REV_CRS_	\$1,201.11	Payroll Tax
CHECK	4/29/2019	CHECK 6503 LG&E	\$1,005.52	Utility
CHECK	4/29/2019	CHECK 6543 DTE Energy	\$825.16	Utility
CHECK	4/29/2019	CHECK 6526 DTE Energy	\$605.04	Utility
DEBIT	4/29/2019	VA DEPT TAXATION TAX PAYMEN	\$452.05	Payroll Tax
CHECK	4/29/2019	CHECK 5586 Justin Forella	\$450.00	Event Refund
DEBIT	4/29/2019	INTUIT PYMT	\$431.00	Merchant Fee
DEBIT	4/29/2019	CYBERSRC	\$400.00	Merchant Fee
CHECK	4/29/2019	CHECK 6566 American Fire Protection	\$360.00	Maintenance
CHECK	4/29/2019	CHECK 6564 Frontier Communications	\$357.36	Utility
CHECK	4/29/2019	CHECK 6573 Cox Business	\$309.83	Utility
CHECK	4/29/2019	CHECK 6563 Comcast	\$282.66	Utility
CHECK	4/29/2019	CHECK 6553 Town of Cary	\$191.50	Utility
DEBIT	4/29/2019	TAX_REV_WKC_ECKS TRD	\$34.40	Payroll Tax
DEBIT	4/29/2019	INTUIT PYMT	\$10.00	Merchant Fee
DEBIT	4/29/2019	INTUIT PYMT	\$6.50	Merchant Fee
DEBIT	4/29/2019	INTUIT PYMT	\$5.00	Merchant Fee
CHECK	4/30/2019	CHECK 6611 BTJD	\$18,085.86	Legal Fees

NOAH CORPORATION
PAYMENTS TO CREDITORS IN 90 DAY PRE-PETITION PERIOD

Type	Date	Payee	Amount	Purpose
DEBIT	4/30/2019	IRS USATAXPYMT	\$10,981.49	Payroll Tax
CHECK	4/30/2019	CHECK 5611 ASCE	\$4,327.29	Event Refund
DEBIT	4/30/2019	TXWORKFORCECOMM DEBIT	\$4,317.90	Payroll Tax
CHECK	4/30/2019	CHECK 6386 City of Chesapeake	\$3,179.46	Business Tax License
DEBIT	4/30/2019	UNEMP COMP EFT PADLIUCCON	\$2,912.73	Payroll Tax
DEBIT	4/30/2019	FEDCHEX-	\$2,458.00	Interest
DEBIT	4/30/2019	LIBERTASFUNDING	\$2,457.14	Interest
DEBIT	4/30/2019	WI DEPT REVENUE	\$2,181.58	Payroll Tax
DEBIT	4/30/2019	NEB DEPT REVENUE	\$1,645.21	Payroll Tax
DEBIT	4/30/2019	OPTUM BANK	\$1,622.52	Insurance
DEBIT	4/30/2019	WISCONSIN UI TAX	\$1,595.32	Payroll Tax
CHECK	4/30/2019	CHECK 6576 P&E Landscape	\$1,469.70	Landscape
CHECK	4/30/2019	CHECK 6595 Landcare	\$1,416.25	Landscape
DEBIT	4/30/2019	WORKFORCE SERVIC WAGES	\$1,323.68	Payroll Tax
DEBIT	4/30/2019	FLA DEPT REVENUE CUT	\$960.42	Payroll Tax
DEBIT	4/30/2019	GEORGIA ITS TAX GA	\$878.86	Payroll Tax
CHECK	4/30/2019	CHECK 6570 American Electric Power	\$789.70	Utility
CHECK	4/30/2019	CHECK 6511 Columbia Gas	\$695.05	Utility
DEBIT	4/30/2019	BERK TAX PMT EMP	\$602.49	Payroll Tax
CHECK	4/30/2019	CHECK 6596 Timberland Landscape	\$575.00	Landscape
CHECK	4/30/2019	CHECK 6574 Public Service Company	\$489.49	Utility
DEBIT	4/30/2019	INTUIT PYMT	\$451.00	Merchant Fee
DEBIT	4/30/2019	CITY of Westminster	\$437.20	Utility
CHECK	4/30/2019	CHECK 6547 North Shore Gas	\$433.97	Utility
CHECK	4/30/2019	CHECK 6159 Outdoor Design Solutions	\$424.00	Landscape
CHECK	4/30/2019	CHECK 6587 The Illuminating Company	\$413.94	Utility
CHECK	4/30/2019	CHECK 6568 Nicor Gas	\$410.19	Utility
CHECK	4/30/2019	CHECK 6577 Town of Fairview	\$290.70	Utility
CHECK	4/30/2019	CHECK 6531 Utah Tax Commission	\$200.00	Payroll Tax
CHECK	4/30/2019	CHECK 6413 UBS	\$163.31	Utility
DEBIT	4/30/2019	BERK TAX PMT EMP	\$144.97	Payroll Tax
CHECK	4/30/2019	CHECK 6565 Kentucky State Treasurer	\$22.85	Sales Tax
DEBIT	4/30/2019	INTUIT PYMT	\$10.00	Merchant Fee
DEBIT	4/30/2019	INTUIT PYMT	\$6.00	Merchant Fee
DEBIT	4/30/2019	INTUIT PYMT	\$6.00	Merchant Fee
DEBIT	4/30/2019	INTUIT PYMT	\$5.00	Merchant Fee
CHECK	5/1/2019	CHECK 6579 Naylor Insurance	\$26,054.48	Insurance
DEBIT	5/1/2019	Divvy T Check Operational Payments	\$25,000.00	Operations
DEBIT	5/1/2019	UTAH801/297-7703 TAX PAYMNT	\$13,081.19	Payroll Tax
DEBIT	5/1/2019	Susan Petersen	\$5,728.56	Interest
DEBIT	5/1/2019	Sherrie East	\$5,231.35	Interest
DEBIT	5/1/2019	Judi Navarro	\$4,687.50	Interest
DEBIT	5/1/2019	IL DEPT EMPL SEC UNEMPL Tax	\$3,600.26	Payroll Tax
DEBIT	5/1/2019	IA DEPT OF REV IA REV PAY	\$3,473.00	Payroll Tax
DEBIT	5/1/2019	Dept of Revenue KY TaxPmnt	\$2,557.94	Payroll Tax
CHECK	5/1/2019	CHECK 6598 Demo Productions	\$2,520.00	Marketing
DEBIT	5/1/2019	FEDCHEX-MERCHANT	\$2,458.00	Interest
DEBIT	5/1/2019	LIBERTASFUNDING	\$2,457.14	Interest
DEBIT	5/1/2019	Alabama Power	\$2,152.89	Utility
CHECK	5/1/2019	CHECK 6594 Simplex Grinnel	\$1,491.40	Maintenance
DEBIT	5/1/2019	SC DEPT REVENUE DEBIT	\$1,414.41	Payroll Tax
DEBIT	5/1/2019	TN Dept of Labor SUTA	\$1,126.57	Payroll Tax
CHECK	5/1/2019	CHECK 6569 City of Naperville	\$1,104.42	Utility
CHECK	5/1/2019	CHECK 6590 TXU Energy	\$1,064.56	Utility

NOAH CORPORATION
PAYMENTS TO CREDITORS IN 90 DAY PRE-PETITION PERIOD

Type	Date	Payee	Amount	Purpose
DEBIT	5/1/2019	VA. EMPLOY COMM UITAX	\$933.66	Payroll Tax
CHECK	5/1/2019	CHECK 6588 Duke Energy	\$865.03	Utility
DEBIT	5/1/2019	DEPT OF LABOR	\$844.56	Payroll Tax
CHECK	5/1/2019	CHECK 6572 Star Treatment Valet	\$840.00	Valet - Sugar Land
DEBIT	5/1/2019	UMR INC CONCENTR	\$427.09	Health Insurance
DEBIT	5/1/2019	INTUIT PYMT	\$397.00	Merchant Fee
CHECK	5/1/2019	CHECK 6575 Direct TV	\$339.65	Utility
CHECK	5/1/2019	CHECK 6578 City of Little Rock	\$292.50	Utility
DEBIT	5/1/2019	AR.gov AR.gov	\$221.86	Payroll Tax
CHECK	5/1/2019	CHECK 6591 Direct TV	\$216.13	Utility
CHECK	5/1/2019	CHECK 6580 Finance Department	\$186.75	Utility
CHECK	5/1/2019	CHECK 6583 Cranberry Township	\$179.00	Utility
CHECK	5/1/2019	CHECK 6581 Piedmont Natural Gas	\$176.49	Utility
CHECK	5/1/2019	CHECK 6585 Direct Tv	\$173.81	Utility
CHECK	5/1/2019	CHECK 6584 Century Link	\$170.64	Utility
DEBIT	5/1/2019	STATE OF NM DWS UI PAYMENT	\$164.61	Payroll Tax
DEBIT	5/1/2019	INTUIT PYMT	\$150.00	Merchant Fee
CHECK	5/1/2019	CHECK 6494 Centerpoint Energy	\$102.68	Utility
DEBIT	5/1/2019	ID.gov ID.gov 877-443-3468 CCD ID: 1522077581	\$32.88	Payroll Tax
DEBIT	5/1/2019	SCDEW SC UI Tax	\$21.81	Payroll Tax
DEBIT	5/1/2019	INTUIT PYMT	\$10.00	Merchant Fee
DEBIT	5/1/2019	INTUIT PYMT	\$10.00	Merchant Fee
DEBIT	5/1/2019	INTUIT PYMT	\$9.50	Merchant Fee
DEBIT	5/2/2019	Divvy T Check Operational Payments	\$20,000.00	Operations
DEBIT	5/2/2019	Divvy T Check Operational Payments	\$10,000.00	Operations
CHECK	5/2/2019	CHECK 6436 Docusign	\$3,358.20	Dues & Subscriptions
DEBIT	5/2/2019	FEDCHEX-MERCHANT	\$2,458.00	Interest
DEBIT	5/2/2019	LIBERTASFUNDING	\$2,457.14	Interest
DEBIT	5/2/2019	Kansas.gov	\$2,243.86	Payroll Tax
CHECK	5/2/2019	CHECK 6607 San Antonio Water	\$2,082.86	Utility
DEBIT	5/2/2019	DUKEENERGY-FL	\$1,923.44	Utility
DEBIT	5/2/2019	HIGH-POINT-UTIL UTIL-PMNT	\$1,552.05	Utility
DEBIT	5/2/2019	COLO UI ER SV PRM PYMT	\$1,148.27	Payroll Tax
CHECK	5/2/2019	CHECK 6600 SRP	\$1,142.26	Utility
DEBIT	5/2/2019	EMPL SEC COMM	\$1,040.04	Payroll Tax
DEBIT	5/2/2019	INTUIT PYMT SOLN	\$834.00	Merchant Fee
CHECK	5/2/2019	CHECK 6609 Siemens Industry	\$700.00	Maintenance
DEBIT	5/2/2019	CYBERSRC	\$638.02	Merchant Fee
CHECK	5/2/2019	CHECK 6605 Fire Safety Solutions	\$637.27	Maintenance
CHECK	5/2/2019	CHECK 6599 PNM	\$619.15	Utility
DEBIT	5/2/2019	CSI MODR TAX	\$563.50	Payroll Tax
DEBIT	5/2/2019	INTUIT PYMT	\$358.00	Merchant Fee
DEBIT	5/2/2019	IRS USATAXPYMT	\$329.71	Payroll Tax
DEBIT	5/2/2019	INTUIT PYMT	\$290.00	Merchant Fee
DEBIT	5/2/2019	MO DIR EMP SERV MO UI TAX	\$285.12	Payroll Tax
CHECK	5/2/2019	CHECK 6602 City of Charlotte	\$187.70	Utility
CHECK	5/2/2019	CHECK 6601 City of Chandler	\$105.72	Utility
CHECK	5/2/2019	CHECK 6567 Illuminating Company	\$47.08	Utility
DEBIT	5/2/2019	CTYBLUEASHTAX MUNI TAX	\$34.74	Payroll Tax
CHECK	5/2/2019	CHECK 6582 FedEx	\$29.00	Shipping
DEBIT	5/2/2019	INTUIT PYMT SOLN TRAN FEE	\$13.00	Merchant Fee
DEBIT	5/2/2019	INTUIT PYMT	\$10.00	Merchant Fee
DEBIT	5/2/2019	INTUIT PYMT	\$10.00	Merchant Fee
DEBIT	5/2/2019	INTUIT PYMT	\$10.00	Merchant Fee

NOAH CORPORATION
PAYMENTS TO CREDITORS IN 90 DAY PRE-PETITION PERIOD

Type	Date	Payee	Amount	Purpose
DEBIT	5/2/2019	INTUIT PYMT	\$9.95	Merchant Fee
DEBIT	5/2/2019	INTUIT PYMT	\$9.95	Merchant Fee
DEBIT	5/3/2019	IRS	\$86,949.85	Payroll Tax
DEBIT	5/3/2019	Divvy T Check Operational Payments	\$18,000.00	Operations
CHECK	5/3/2019	CHECK 6597 Waste Management	\$9,528.00	Utility - Garbage for Buildings
DEBIT	5/3/2019	Divvy T Check Operational Payments	\$5,000.00	Operations
DEBIT	5/3/2019	76 Investments, LP	\$4,000.00	Interest
DEBIT	5/3/2019	Matthew Francom	\$2,675.00	Interest
DEBIT	5/3/2019	FEDCHEX-MERCHANT	\$2,458.00	Interest
DEBIT	5/3/2019	LIBERTASFUNDING	\$2,457.14	Interest
DEBIT	5/3/2019	SERVICE CHARGES FOR THE MONTH OF APRIL	\$1,457.40	Bank Fees
CHECK	5/3/2019	CHECK 6496 TXU Energy	\$1,377.62	Utility
CHECK	5/3/2019	CHECK 6557 TXU Energy	\$1,140.14	Utility
CHECK	5/3/2019	CHECK 6499 TXU Energy	\$1,002.62	Utility
DEBIT	5/3/2019	Aaron Hoke	\$1,000.00	Interest
DEBIT	5/3/2019	AMERICAN HERITAG BENMAN	\$727.50	Insurance
CHECK	5/3/2019	CHECK 6612 Northeast Natural Gas	\$509.40	Utility
CHECK	5/3/2019	CHECK 6571 Automated Mechanical	\$500.00	Maintenance
DEBIT	5/3/2019	INTUIT PYMT	\$422.00	Merchant Fee
DEBIT	5/3/2019	COMMWLTHOFPA INT PAEMPLOYTX 020706434 CCD ID: 1236003133	\$420.87	Payroll Tax
CHECK	5/3/2019	CHECK 6603 Birmingham Water	\$212.95	Utility
DEBIT	5/3/2019	COMMWLTHOFPA INT	\$206.46	Payroll Tax
DEBIT	5/3/2019	Louisville Gas & WEB	\$30.16	Utility
CHECK	5/3/2019	CHECK 6488 Time Warner Cable	\$11.28	Utility
DEBIT	5/3/2019	INTUIT PYMT	\$10.00	Merchant Fee
DEBIT	5/6/2019	Divvy T Check Operational Payments	\$18,000.00	Operations
DEBIT	5/6/2019	FEDCHEX-MERCHANT	\$2,458.00	Interest
DEBIT	5/6/2019	LIBERTASFUNDING	\$2,457.74	Interest
CHECK	5/6/2019	CHECK 6623 Granite Landcare	\$2,317.57	Landscape
CHECK	5/6/2019	CHECK 6630 Landcare	\$2,196.74	Landscape
CHECK	5/6/2019	CHECK 5625 Lee Ann Moss	\$1,886.25	Payroll
CHECK	5/6/2019	CHECK 5624	\$1,180.00	Event Refund
CHECK	5/6/2019	CHECK 6593 Fairacres	\$1,000.00	Landscape
CHECK	5/6/2019	CHECK 5626 LeeAnn Moss	\$783.41	Payroll
CHECK	5/6/2019	CHECK 6620 American Fire Protection	\$325.00	Utility
CHECK	5/6/2019	CHECK 6589 City of South Jordan	\$238.79	Utility
CHECK	5/6/2019	CHECK 6610 Public Works & Utilities	\$157.54	Utility
CHECK	5/6/2019	CHECK 6619 City of Southfield	\$128.31	Utility
CHECK	5/6/2019	CHECK 6604 Weston Mud	\$79.37	Utility
CHECK	5/6/2019	CHECK 6616 Birmingham Water Works	\$52.35	Utility
CHECK	5/6/2019	CHECK 6586 FedEx	\$29.00	Shipping
CHECK	5/6/2019	CHECK 6617 UBS	\$3.22	Utility
DEBIT	5/7/2019	UMR INC CONCENTR	\$19,999.48	Health Insurance
DEBIT	5/7/2019	Divvy T Check Operational Payments	\$15,000.00	Operations
DEBIT	5/7/2019	Bapu Supplies	\$6,429.95	Linens
CHECK	5/7/2019	CHECK 6624 Elite Landscape	\$1,618.00	Landscape
DEBIT	5/7/2019	DOMINION VA POWE	\$1,093.65	Utility
DEBIT	5/7/2019	Alliant -	\$669.19	Utility
CHECK	5/7/2019	CHECK 6615 Vanguard Fire	\$540.00	Maintenance
CHECK	5/7/2019	CHECK 6614 Granite Landscape	\$253.27	Landscape
CHECK	5/7/2019	CHECK 6530 North Carolina Department Revenue	\$225.00	Sales Tax
DEBIT	5/7/2019	ATT	\$191.38	Utility
CHECK	5/7/2019	CHECK 6613 Weston Mud	\$171.27	Utility

NOAH CORPORATION
PAYMENTS TO CREDITORS IN 90 DAY PRE-PETITION PERIOD

Type	Date	Payee	Amount	Purpose
DEBIT	5/7/2019	CITY-OF-IRVING	\$159.06	Utility
CHECK	5/7/2019	CHECK 6629 Quail Springs Office Park	\$117.67	HOA
DEBIT	5/7/2019	FEDCHEX-MERCHANT	\$105.00	Merchant Fee
CHECK	5/7/2019	CHECK 6618 JCW	\$98.70	Utility
DEBIT	5/7/2019	CITY-OF-IRVING	\$30.03	Utility
DEBIT	5/7/2019	CITY-OF-IRVING UTIL-PMNTS	\$11.90	Utility
DEBIT	5/8/2019	Divvy T Check Operational Payments	\$12,000.00	Operations
DEBIT	5/8/2019	Divvy T Check Operational Payments	\$12,000.00	Operations
DEBIT	5/8/2019	Bapu Supplies	\$6,429.95	Linens
DEBIT	5/8/2019	Bapu Supplies	\$6,429.94	Linens
CHECK	5/8/2019	CHECK 6622 Timberland Landscape	\$1,537.50	Landscape
CHECK	5/8/2019	CHECK 6606 City of Richardson	\$775.12	Utility
DEBIT	5/8/2019	UMR INC CONCENTR	\$428.03	Health Insurance
DEBIT	5/8/2019	INTUIT PYMT	\$389.00	Merchant Fee
DEBIT	5/8/2019	INTUIT PYMT	\$389.00	Merchant Fee
DEBIT	5/8/2019	CYBERSRC	\$150.00	Merchant Fee
CHECK	5/8/2019	CHECK 5617 05/08 Alicia Sanchez	\$112.00	Event Refund
DEBIT	5/8/2019	INTUIT PYMT	\$10.00	Merchant Fee
DEBIT	5/8/2019	INTUIT PYMT	\$10.00	Merchant Fee
DEBIT	5/9/2019	Ron & Nancy Neil	\$3,506.66	Interest
DEBIT	5/9/2019	Robert Baker	\$2,500.00	Interest
DEBIT	5/9/2019	IRS USATAXPYMT	\$1,045.46	Payroll Tax
DEBIT	5/9/2019	Marilyn Bowser	\$1,000.00	Interest
DEBIT	5/9/2019	Ben Thomas	\$1,000.00	Interest
DEBIT	5/9/2019	Bria Broadway	\$910.02	Interest
CHECK	5/9/2019	CHECK 6638 ABCWUA	\$857.98	Utility
DEBIT	5/9/2019	Kent Harker	\$814.58	Interest
CHECK	5/9/2019	CHECK 6633 Metro Utilities	\$647.25	Utility
DEBIT	5/9/2019	Shauna Lee Thompson	\$531.24	Interest
CHECK	5/9/2019	CHECK 6628 Star Treatment Valet	\$480.00	Valet - Sugar Land
CHECK	5/9/2019	CHECK 6639 Direct TV	\$202.54	Utility
CHECK	5/9/2019	CHECK 6640 Direct TV	\$199.38	Utility
DEBIT	5/9/2019	INTUIT PYMT	\$186.00	Merchant Fee
CHECK	5/9/2019	CHECK 5614 Kay Dean	\$120.00	Event Refund
CHECK	5/9/2019	CHECK 6625 Kenneth L Maun Tax Accessor	\$81.92	Personal Property Tax
DEBIT	5/9/2019	David Harper	\$77.57	Interest
DEBIT	5/9/2019	INTUIT PYMT	\$10.00	Merchant Fee
DEBIT	5/10/2019	Noah's Irving	\$28,405.00	Rent
DEBIT	5/10/2019	VICTOR E. GRIJALVA SR. TRUST	\$17,500.00	Interest
DEBIT	5/10/2019	Divvy T Check Operational Payments	\$12,000.00	Operations
DEBIT	5/10/2019	Bapu Supplies	\$6,429.94	Linens
CHECK	5/10/2019	CHECK 6631 UHS	\$3,875.34	Health Insurance
CHECK	5/10/2019	CHECK 6644 Rocky Mtn. Power	\$3,362.79	Utility
CHECK	5/10/2019	CHECK 6645 CPS Energy	\$2,727.44	Utility
CHECK	5/10/2019	CHECK 6635 Memphis Light Gas	\$1,414.00	Utility
CHECK	5/10/2019	CHECK 6621 P&E Landscape	\$1,162.73	Landscape
CHECK	5/10/2019	CHECK 6642 Westar Energy	\$590.79	Utility
CHECK	5/10/2019	CHECK 6634 OG&E	\$582.54	Utility
CHECK	5/10/2019	CHECK 6637 Midamerican Energy	\$548.92	Utility
CHECK	5/10/2019	CHECK 6632 Pennsylvania American Water	\$384.15	Utility
CHECK	5/10/2019	CHECK 6592 Dominion Energy	\$326.79	Utility
CHECK	5/10/2019	CHECK 5623 Trevonne Cuffee	\$200.00	Event Refund
CHECK	5/10/2019	CHECK 6636 Greenville Water	\$191.52	Utility
CHECK	5/10/2019	CHECK 6649 Labor Commission	\$180.00	Maintenance

NOAH CORPORATION
PAYMENTS TO CREDITORS IN 90 DAY PRE-PETITION PERIOD

Type	Date	Payee	Amount	Purpose
CHECK	5/10/2019	CHECK 6627 TN Dept. of Env.	\$138.77	Utility
CHECK	5/13/2019	CHECK 5627 BTJD	\$15,477.00	Legal Fees
CHECK	5/13/2019	CHECK 6653 Advantage Telecom	\$10,582.80	Utility - Internet for Buildings
DEBIT	5/13/2019	Bapu Supplies	\$9,396.89	Linens
CHECK	5/13/2019	CHECK 6660 Waste Management	\$9,312.00	Utility - Garbage for Buildings
DEBIT	5/13/2019	Divvy T Check Operational Payments	\$9,000.00	Operations
CHECK	5/13/2019	CHECK 6648 Rockwood Electric	\$966.22	Utility
DEBIT	5/13/2019	James Wallace	\$852.08	Interest
CHECK	5/13/2019	CHECK 6657 Alliant Energy	\$562.45	Utility
DEBIT	5/13/2019	OK NATURAL GAS	\$299.08	Utility
CHECK	5/13/2019	CHECK 6654 Direct TV	\$214.03	Utility
CHECK	5/13/2019	CHECK 6656 Southern New Hampshire Pest Control	\$75.00	Maintenance
DEBIT	5/14/2019	IRS	\$86,947.04	Payroll Tax
DEBIT	5/14/2019	Travelers INS PREM	\$17,231.97	Insurance
DEBIT	5/14/2019	Divvy T Check Operational Payments	\$11,000.00	Operations
DEBIT	5/14/2019	Bapu Supplies	\$9,396.00	Linens
DEBIT	5/14/2019	Nick Redd	\$5,000.00	Employee Reimbursement
CHECK	5/14/2019	CHECK 6663 Paige Peterson	\$3,264.00	Event Refund
DEBIT	5/14/2019	OPTUM BANK	\$1,622.14	Insurance
CHECK	5/14/2019	CHECK 6655 Century Link	\$1,253.20	Utility
DEBIT	5/14/2019	Entergy Services	\$1,206.66	Utility
DEBIT	5/14/2019	American Express	\$1,000.00	CC Reimburse-Susanna Bowser
CHECK	5/14/2019	CHECK 6647 TXU Energy	\$941.77	Utility
DEBIT	5/14/2019	R.I.T.A. RITA iFile	\$709.58	Payroll Tax
CHECK	5/14/2019	CHECK 6608 Dominion Energy	\$559.82	Utility
DEBIT	5/14/2019	NM GAS COMPANY	\$158.66	Utility
CHECK	5/14/2019	CHECK 6658 Kansas Gas Service	\$120.87	Utility
CHECK	5/14/2019	CHECK 6532 Arizona Department of Revenue	\$50.00	Sales Tax
CHECK	5/15/2019	CHECK 6659 Naylor Insurance Agency	\$26,054.48	Insurance
DEBIT	5/15/2019	Divvy T Check Operational Payments	\$11,000.00	Operations
DEBIT	5/15/2019	Bapu Supplies	\$9,396.00	Linens
DEBIT	5/15/2019	NC DEPT REVENUE TAX PYMT	\$2,560.00	Payroll Tax
DEBIT	5/15/2019	IL DEPT OF REVEN EDI PYMNTS	\$1,660.67	Payroll Tax
DEBIT	5/15/2019	INTUIT PYMT SOLN INTUITPMTS	\$1,280.00	Merchant Fee
DEBIT	5/15/2019	FIRSTENERGY	\$711.60	Utility
CHECK	5/15/2019	CHECK 6651 ORUD	\$219.84	Utility
CHECK	5/15/2019	CHECK 6652 Galveston Water	\$143.41	Utility
CHECK	5/15/2019	CHECK 6650 Quail Springs Office Park	\$117.67	HOA
DEBIT	5/15/2019	INTUIT PYMT	\$10.00	Merchant Fee
DEBIT	5/16/2019	Divvy T Check Operational Payments	\$12,000.00	Operations
DEBIT	5/16/2019	Bapu Supplies	\$9,396.00	Linens
CHECK	5/16/2019	CHECK 6641 Century Link	\$1,860.19	Utility
CHECK	5/16/2019	CHECK 6643 Star Treatment Valet	\$820.00	Valet - Sugar Land
DEBIT	5/16/2019	AR DFA REVENUE	\$570.26	Payroll Tax
CHECK	5/16/2019	CHECK 6666 City of Tulsa	\$294.98	Utility
DEBIT	5/16/2019	AL-DEPT OF REV DIRECT	\$255.08	Payroll Tax
CHECK	5/16/2019	CHECK 6668 Direct TV	\$248.58	Utility
DEBIT	5/16/2019	OPTUM BANK	\$220.00	Insurance
CHECK	5/16/2019	CHECK 6669 Direct TV	\$197.97	Utility
CHECK	5/16/2019	CHECK 6677 Oklahoma Natural Gas	\$190.17	Utility
CHECK	5/16/2019	CHECK 6672 Direct TV	\$164.53	Utility
CHECK	5/16/2019	CHECK 6670 WaterOne	\$50.79	Utility
DEBIT	5/17/2019	BARTLEY NE BEN	\$20,000.00	Katy, TX Rent
CHECK	5/17/2019	CHECK 6708 Kilpatrick Townsend	\$13,225.97	Richardson Rent

NOAH CORPORATION
PAYMENTS TO CREDITORS IN 90 DAY PRE-PETITION PERIOD

Type	Date	Payee	Amount	Purpose
DEBIT	5/17/2019	Divvy T Check Operational Payments	\$12,000.00	Operations
DEBIT	5/17/2019	Bapu Supplies	\$9,396.00	Linens
DEBIT	5/17/2019	Susan Petersen	\$5,728.56	Interest
CHECK	5/17/2019	CHECK 6719 William Bowser	\$2,500.00	Employee Reimbursement
DEBIT	5/17/2019	8011OHIO-TAXOEWH OH WH	\$1,139.96	Payroll Tax
CHECK	5/17/2019	CHECK 6676 Comcast	\$1,003.18	Utility
CHECK	5/17/2019	CHECK 6671 P&E Landscape	\$883.57	Landscape
CHECK	5/17/2019	CHECK 6664 Piedmont Centre Association	\$441.50	HOA
DEBIT	5/17/2019	INTUIT PYMT	\$393.00	Merchant Fee
CHECK	5/17/2019	CHECK 6646 Centerpointe Energy	\$270.85	Utility
CHECK	5/17/2019	CHECK 6684 Direct TV	\$202.58	Utility
CHECK	5/17/2019	CHECK 6673 Direct TV	\$201.33	Utility
DEBIT	5/17/2019	8006OHIO-TAXOSWH OH	\$101.01	Payroll Tax
CHECK	5/17/2019	CHECK 6674 Kingston Water Department	\$80.60	Utility
CHECK	5/17/2019	CHECK 6682 Kansas Gas Service	\$77.00	Utility
DEBIT	5/17/2019	CTYBLUEASHTAX MUNI TAX	\$52.52	Payroll Tax
DEBIT	5/17/2019	INTUIT PYMT	\$10.00	Merchant Fee
CHECK	5/20/2019	CHECK 6701 Waste Management	\$12,256.13	Utility - Garbage for Buildings
DEBIT	5/20/2019	Divvy T Check Operational Payments	\$12,000.00	Operations
DEBIT	5/20/2019	Bapu Supplies	\$8,500.00	Linens
CHECK	5/20/2019	CHECK 6690 Reynolds Landscape	\$5,307.20	Landscape
CHECK	5/20/2019	CHECK 6699 Fullcare Landscape	\$3,778.90	Landscape
CHECK	5/20/2019	CHECK 6689 UNUM	\$3,003.60	Insurance
CHECK	5/20/2019	CHECK 6715 Landcare	\$2,229.00	Landscape
CHECK	5/20/2019	CHECK 6679 05/20 Premiere Landscape	\$1,818.00	Landscape
CHECK	5/20/2019	CHECK 5628 05/20	\$1,628.77	Event Refund
CHECK	5/20/2019	CHECK 6687 City of High Point	\$1,605.11	Utility
CHECK	5/20/2019	CHECK 6678 Fairacres Lawn	\$1,550.00	Landscape
CHECK	5/20/2019	CHECK 6388 Utah County Treasurer	\$1,407.86	Personal Property Tax
CHECK	5/20/2019	CHECK 6693 Wake County Revenue	\$1,360.81	Personal Property Tax
CHECK	5/20/2019	CHECK 6709 Xcel Energy	\$1,124.98	Utility
DEBIT	5/20/2019	CYBERSRC	\$944.00	Merchant Fee
DEBIT	5/20/2019	INTUIT PYMT SOLN	\$826.00	Merchant Fee
CHECK	5/20/2019	CHECK 6675 TXU Energy	\$665.55	Utility
CHECK	5/20/2019	CHECK 6698 Duke Energy	\$637.61	Utility
CHECK	5/20/2019	CHECK 6688 Johnson Controls Fire Protection	\$450.00	Maintenance
DEBIT	5/20/2019	COMMWLTHOFPA INT	\$431.23	Payroll Tax
CHECK	5/20/2019	CHECK 6705 Grande	\$380.30	Utility
CHECK	5/20/2019	CHECK 6704 MG&E	\$344.07	Utility
CHECK	5/20/2019	CHECK 6683 Firetrol Protections	\$300.00	Maintenance
CHECK	5/20/2019	CHECK 6667 City of Sugar Land	\$295.06	Utility
CHECK	5/20/2019	CHECK 6707 Peoples	\$254.68	Utility
CHECK	5/20/2019	CHECK 6686 Aqua OH	\$189.81	Utility
CHECK	5/20/2019	CHECK 6706 City of Richardson	\$170.29	Utility
CHECK	5/20/2019	CHECK 6685 Aqua OH	\$135.07	Utility
DEBIT	5/20/2019	HAMPTON ROADS SA UTILITY	\$109.84	Utility
CHECK	5/20/2019	CHECK 6694 Dominion Energy North Carolina	\$90.22	Utility
DEBIT	5/20/2019	INTUIT PYMT	\$10.00	Merchant Fee
DEBIT	5/21/2019	IRS	\$27,390.60	Payroll Tax
DEBIT	5/21/2019	Divvy T Check Operational Payments	\$12,000.00	Operations
DEBIT	5/21/2019	Divvy T Check Operational Payments	\$12,000.00	Operations
DEBIT	5/21/2019	Avant8\	\$10,000.00	Marketing - SEO
DEBIT	5/21/2019	Bapu Supplies	\$8,500.00	Linens
DEBIT	5/21/2019	Bapu Supplies	\$8,500.00	Linens

NOAH CORPORATION
PAYMENTS TO CREDITORS IN 90 DAY PRE-PETITION PERIOD

Type	Date	Payee	Amount	Purpose
DEBIT	5/21/2019	FedEx	\$1,995.45	Shipping
CHECK	5/21/2019	CHECK 6680 P&E Landscape	\$1,919.95	Landscape
CHECK	5/21/2019	CHECK 6716 Granite Landscape	\$1,677.88	Landscape
CHECK	5/21/2019	CHECK 5629	\$1,358.46	Event Refund
CHECK	5/21/2019	CHECK 6700 Berg Chicago Inc.	\$1,265.00	Landscape
CHECK	5/21/2019	CHECK 6661 Breanna McKinstry	\$1,033.75	Event Refund
CHECK	5/21/2019	CHECK 6692 OPPD	\$783.21	Utility
CHECK	5/21/2019	CHECK 6714 COMED	\$563.50	Utility
DEBIT	5/21/2019	INTUIT PYMT	\$511.00	Merchant Fee
CHECK	5/21/2019	CHECK 6681 05/21 Professional Systems	\$482.70	Maintenance
DEBIT	5/21/2019	INTUIT PYMT	\$413.00	Merchant Fee
CHECK	5/21/2019	CHECK 6697 Kenneth L Maun Tax Accessor	\$101.88	Personal Property Tax
DEBIT	5/21/2019	Telecheck	\$55.00	Merchant Fee
DEBIT	5/21/2019	INTUIT PYMT	\$10.00	Merchant Fee
DEBIT	5/21/2019	INTUIT PYMT	\$10.00	Merchant Fee
DEBIT	5/22/2019	Bapu Supplies	\$8,500.00	Linens
DEBIT	5/22/2019	Divvy T Check Operational Payments	\$8,500.00	Operations
DEBIT	5/22/2019	Divvy T Check Operational Payments	\$2,500.00	Operations
DEBIT	5/22/2019	UMR INC CONCENTR FUNDING	\$1,436.40	Health Insurance
DEBIT	5/22/2019	AL-DEPT OF REV DIRECT DBT	\$962.33	Payroll Tax
DEBIT	5/22/2019	TAX PAYMENTS OK TAX PMT	\$768.00	Payroll Tax
CHECK	5/22/2019	CHECK 6696 City of Lake Mary	\$508.23	Utility
CHECK	5/22/2019	CHECK 5621 Allen Young Life	\$209.00	Event Refund
DEBIT	5/22/2019	OPTUM BANK	\$10.00	Merchant Fee
DEBIT	5/23/2019	Bennett Johnson Tueller & Deere	\$73,944.75	Legal Fees
CHECK	5/23/2019	CHECK 6695 TXU Energy	\$1,480.21	Utility
CHECK	5/23/2019	CHECK 6718 Fairacres Lawn	\$1,000.00	Landscape
DEBIT	5/23/2019	IRS USATAXPYMT	\$880.25	Payroll Tax
CHECK	5/23/2019	CHECK 6717 05/23 Premiere Landscape	\$585.00	Landscape
CHECK	5/23/2019	CHECK 6702 Star Treatment Valet	\$550.00	Valet - Sugar Land
CHECK	5/23/2019	CHECK 6713 Lake Virgina Owner's Association	\$451.32	HOA
CHECK	5/23/2019	CHECK 6710 Consumers Energy	\$241.36	Utility
CHECK	5/23/2019	CHECK 6721 Dynamark Monitoring	\$120.98	Utility
DEBIT	5/24/2019	Prince Yeates Trust Account	\$12,000.00	Retainer-Legal
DEBIT	5/24/2019	Divvy T Check Operational Payments	\$6,000.00	Operations
CHECK	5/24/2019	CHECK 6724 Landcare	\$1,735.83	Landscape
CHECK	5/24/2019	CHECK 6691 Fine Edge Lawn	\$1,250.00	Landscape
CHECK	5/24/2019	CHECK 6711 LG&E	\$1,121.08	Utility
CHECK	5/24/2019	CHECK 6703 TXU Energy	\$880.06	Utility
CHECK	5/24/2019	CHECK 6729 Landcare	\$867.91	Landscape
DEBIT	5/24/2019	Intuit	\$850.00	Merchant Fee
DEBIT	5/24/2019	INTUIT PYMT	\$10.00	Merchant Fee
DEBIT	5/28/2019	Durham Jones & Pinegar	\$95,000.00	Retainer-Legal
DEBIT	5/28/2019	Piercy Bowler Taylor & Kern	\$50,000.00	Retainer-CRO, Accounting
DEBIT	5/28/2019	Divvy T Check Operational Payments	\$9,500.00	Operations
DEBIT	5/28/2019	GAMMAGE & BURNHAM, P.L.C.	\$8,402.75	Legal Fees
DEBIT	5/28/2019	BTJD	\$7,000.00	Legal Fees
CHECK	5/28/2019	CHECK 6732 BTJD	\$5,000.59	Legal Fees
CHECK	5/28/2019	CHECK 6665 Amber Ulrich	\$2,700.00	Event Refund
CHECK	5/28/2019	CHECK 6757 Timberland landscape	\$1,405.00	Landscape
DEBIT	5/28/2019	CYBERSRC	\$1,325.00	Merchant Fee
CHECK	5/28/2019	CHECK 6738 City of Naperville	\$1,317.66	Utility
CHECK	5/28/2019	CHECK 6266 Southpoint Town Center	\$1,017.36	HOA
CHECK	5/28/2019	CHECK 6769 MMC Land Management	\$1,000.80	Landscape

NOAH CORPORATION
PAYMENTS TO CREDITORS IN 90 DAY PRE-PETITION PERIOD

Type	Date	Payee	Amount	Purpose
CHECK	5/28/2019	CHECK 6748 American Center Owner's Association	\$990.29	HOA
CHECK	5/28/2019	CHECK 6739 KCP&L	\$825.51	Utility
CHECK	5/28/2019	CHECK 6733 South Carolina Department of Revenue	\$659.65	Sales Tax
CHECK	5/28/2019	CHECK 6742 West Penn Power	\$644.97	Utility
CHECK	5/28/2019	CHECK 6749 Duke Energy	\$605.87	Utility
CHECK	5/28/2019	CHECK 6767 Summitt AC & Heating	\$565.00	Maintenance
CHECK	5/28/2019	CHECK 6736 North Shore Gas	\$338.42	Utility
CHECK	5/28/2019	CHECK 6723 Columbia Gas	\$310.95	Utility
CHECK	5/28/2019	CHECK 6751 Firetol Protection System	\$310.80	Maintenance
CHECK	5/28/2019	CHECK 6763 City of Oklahoma City	\$238.60	Utility
DEBIT	5/28/2019	TIMEWARNERKETTER	\$213.62	Utility
CHECK	5/28/2019	CHECK 6722 Town of Cary	\$192.21	Utility
CHECK	5/28/2019	CHECK 6731 Direct TV	\$190.97	Utility
CHECK	5/28/2019	CHECK 6770 City of Westminster	\$181.11	Utility
CHECK	5/28/2019	CHECK 6741 South Valley Sewer District	\$173.90	Utility
CHECK	5/28/2019	CHECK 6737 Village of Lincolnshire	\$50.72	Utility
CHECK	5/28/2019	CHECK 6727 Sievers Security	\$47.08	Maintenance

SCHEDULE 4

NOAH CORPORATION

PAYMENTS TO INSIDERS DURING 1 YEAR PERIOD PRIOR TO BANKRUPTCY

Date	Vendor	Description	Category	Paid
5/31/18	Marilyn Bowser		Loan Payment	1,000.00
5/31/18	Mark Bowser		Expense Reimbursement	733.65
6/11/18	Susanna Bowser	Note 1	Expense Reimbursement	6,000.00
6/15/18	Hayley Gardner		Expense Reimbursement	6,007.28
6/15/18	Susanna Bowser	Note 1	Expense Reimbursement	2,500.00
6/20/18	Susanna Bowser	Note 1	Expense Reimbursement	6,500.00
6/28/18	William Bowser	Note 1	Expense Reimbursement	6,000.00
6/29/18	Marilyn Bowser		Loan Payment	1,000.00
6/29/18	William Bowser	Note 1	Expense Reimbursement	5,595.61
7/2/18	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	30,000.00
7/3/18	Susanna Bowser	Note 1	Expense Reimbursement	3,500.00
7/5/18	Hayley Gardner		Expense Reimbursement	4,005.65
7/5/18	Kate Jensen		Expense Reimbursement	315.49
7/5/18	Mark Bowser		Expense Reimbursement	683.50
7/5/18	Mike Bowser		Expense Reimbursement	301.69
7/10/18	William Bowser	Note 1	Expense Reimbursement	2,000.00
7/20/18	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	25,000.00
7/20/18	Hayley Gardner		Expense Reimbursement	2,698.75
7/20/18	William Bowser	Note 1	Expense Reimbursement	3,000.00
7/20/18	William Bowser	Note 1	Expense Reimbursement	3,000.00
7/24/18	William Bowser	Note 1	Expense Reimbursement	2,500.00
7/27/18	William Bowser	Note 1	Expense Reimbursement	3,500.00
7/31/18	Marilyn Bowser		Loan Payment	1,000.00
8/6/18	Hayley Gardner		Expense Reimbursement	3,183.46
8/8/18	William Bowser	Note 1	Expense Reimbursement	2,000.00
8/9/18	Mark Bowser		Expense Reimbursement	1,014.34
8/10/18	William Bowser	Note 1	Expense Reimbursement	3,500.00
8/15/18	William Bowser	Note 1	Expense Reimbursement	1,500.00
8/23/18	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	20,000.00
8/23/18	William Bowser	Note 1	Expense Reimbursement	3,500.00
8/24/18	Mark Bowser		Expense Reimbursement	565.64
8/29/18	Hayley Gardner		Expense Reimbursement	3,393.36
9/5/18	William Bowser	Note 1	Expense Reimbursement	2,500.00
9/6/18	Nick Redd	Note 1	Expense Reimbursement	4,000.00
9/14/18	Marilyn Bowser		Loan Payment	1,000.00
9/14/18	Marilyn Bowser Trust		Loan Payment	591.24
9/19/18	Mike Bowser		Expense Reimbursement	483.96
9/21/18	Hayley Gardner		Expense Reimbursement	7,077.24
9/21/18	William Bowser	Note 1	Expense Reimbursement	4,000.00
9/28/18	Marilyn Bowser		Loan Payment	1,000.00
10/26/18	Susanna Bowser	Note 1	Expense Reimbursement	2,500.00
10/31/18	Hayley Gardner		Expense Reimbursement	3,878.38
10/31/18	Marilyn Bowser		Loan Payment	1,000.00
10/31/18	Mark Bowser		Expense Reimbursement	1,216.96
10/31/18	Nick Redd	Note 1	Expense Reimbursement	2,000.00
11/7/18	William Bowser	Note 1	Expense Reimbursement	1,500.00
11/23/18	William Bowser	Note 1	Expense Reimbursement	2,000.00
11/28/18	Hayley Gardner		Expense Reimbursement	4,074.18
12/4/18	Marilyn Bowser		Loan Payment	1,000.00
12/11/18	William Bowser	Note 1	Expense Reimbursement	8,000.00
12/17/18	William Bowser	Note 1	Expense Reimbursement	1,500.00
1/14/19	Marilyn Bowser		Loan Payment	1,000.00
1/25/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	5,138.34
1/26/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	5,138.34
1/29/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	4,556.74
1/30/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	4,556.74
1/31/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	4,556.74
2/1/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	4,556.76
2/4/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	4,556.74
2/5/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	5,384.88
2/7/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	10,769.76
2/7/19	Marilyn Bowser		Loan Payment	1,000.00
2/8/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	5,384.88
2/9/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	5,384.89
2/12/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	5,225.78

NOAH CORPORATION

PAYMENTS TO INSIDERS DURING 1 YEAR PERIOD PRIOR TO BANKRUPTCY

Date	Vendor	Description	Category	Paid
2/13/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	5,225.78
2/14/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	5,225.78
2/15/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	5,225.78
2/16/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	5,240.79
2/20/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	5,050.70
2/21/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	5,050.70
2/22/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	5,050.74
2/23/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	5,050.70
2/26/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	4,967.89
2/27/19	Nick Redd	Note 1	Expense Reimbursement	1,500.00
2/27/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	4,967.89
2/28/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	4,967.89
3/1/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	4,967.89
3/2/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	4,967.89
3/5/19	Hayley Gardner	Note 1	Expense Reimbursement	6,000.00
3/5/19	Susanna Bowser	Note 1	Expense Reimbursement	1,500.00
3/5/19	Susanna Bowser	Note 1	Expense Reimbursement	1,000.00
3/5/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	5,668.29
3/6/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	5,668.29
3/7/19	Susanna Bowser	Note 1	Expense Reimbursement	1,500.00
3/7/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	5,668.29
3/8/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	5,668.29
3/9/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	5,668.70
3/12/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	5,811.70
3/13/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	5,811.70
3/14/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	5,811.70
3/15/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	5,811.70
3/16/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	5,668.29
3/19/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	5,811.70
3/20/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	5,811.70
3/20/19	Marilyn Bowser		Loan Payment	1,000.00
3/21/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	5,811.70
3/22/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	5,811.70
3/23/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	5,811.70
3/25/19	Nick Redd	Note 1	Expense Reimbursement	5,000.00
3/26/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	5,961.44
3/27/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	5,961.44
3/28/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	5,961.44
3/29/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	5,961.44
3/30/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	5,961.44
4/3/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	17,567.79
4/5/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	5,855.93
4/6/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	5,855.93
4/8/19	Susanna Bowser	Note 1	Expense Reimbursement	1,000.00
4/9/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	6,471.28
4/10/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	6,471.28
4/11/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	6,471.28
4/13/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	12,942.56
4/16/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	6,308.89
4/18/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	12,617.78
4/19/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	6,308.89
4/20/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	6,308.89
4/22/19	Marilyn Bowser		Loan Payment	1,000.00
4/23/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	7,080.95
4/24/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	10.59
4/24/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	7,080.95
4/25/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	7,080.95
4/29/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	14,161.90
4/30/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	6,861.54
5/2/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	13,723.08
5/3/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	6,861.54
5/4/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	6,861.54
5/7/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	6,429.95
5/7/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	6,429.94
5/8/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	6,429.94

NOAH CORPORATION

PAYMENTS TO INSIDERS DURING 1 YEAR PERIOD PRIOR TO BANKRUPTCY

Date	Vendor	Description	Category	Paid
5/8/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	6,429.95
5/9/19	Marilyn Bowser		Loan Payment	1,000.00
5/10/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	6,429.94
5/13/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	9,396.89
5/14/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	9,396.00
5/14/19	Nick Redd	Note 1	Expense Reimbursement	5,000.00
5/14/19	Susanna Bowser	Note 1	Expense Reimbursement	1,000.00
5/15/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	9,396.00
5/16/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	9,396.00
5/17/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	9,396.00
5/20/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	8,500.00
5/21/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	8,500.00
5/21/19	Bapu Supplies (Steve Trumbo)	Payment on Account	Linens	8,500.00
Various	Mike Bowser	Gross Payroll 5/29/18 to 5/28/19	Salary	55,200.00
Various	Mark Bowser	Gross Payroll 5/29/18 to 5/28/19	Salary	57,466.48
Various	Andy Bowser	Gross Payroll 5/29/18 to 5/28/19	Salary	15,538.44
Various	Susanna Bowser	Gross Payroll 5/29/18 to 5/28/19	Salary	65,923.07
Various	William Bowser	Gross Payroll 5/29/18 to 5/28/19	Salary	143,769.22
Various	Hayley Bowser	Gross Payroll 5/29/18 to 5/28/19	Salary	48,607.00
Various	Eric Wynn	Gross Payroll 5/29/18 to 5/28/19	Salary	92,692.25
Various	Kate Bowser	Gross Payroll 5/29/18 to 5/28/19	Salary	64,801.04
Various	Nick Redd	Gross Payroll 5/29/18 to 5/28/19	Salary	120,000.00

NOTES:

Note 1 - Credit cards in the name of the individuals were used to pay various company expenses. The amounts shown were payments on the outstanding balance of those credit cards.

SCHEDULE 5

NOAH CORPORATION

List of Payments for Bankruptcy Consulting

Date	Payee	Amount
6/25/18	Bennett Tueller Johnson & Deere	29,186.35
7/20/18	Bennett Tueller Johnson & Deere	750.00
8/9/18	Bennett Tueller Johnson & Deere	10,000.00
9/19/18	Bennett Tueller Johnson & Deere	10,000.00
10/12/18	Bennett Tueller Johnson & Deere	34,032.43
12/28/18	Bennett Tueller Johnson & Deere	28,941.29
5/28/19	Bennett Tueller Johnson & Deere	7,000.00
5/28/19	Bennett Tueller Johnson & Deere	5,000.59
5/23/19	Bennett Tueller Johnson & Deere	73,944.75
3/25/19	Bennett Tueller Johnson & Deere	7,246.93
3/25/19	Bennett Tueller Johnson & Deere	21,903.01
4/15/19	Bennett Tueller Johnson & Deere	18,085.86
4/30/19	Bennett Tueller Johnson & Deere	18,085.86
5/13/19	Bennett Tueller Johnson & Deere	15,477.00
5/28/19	Durham Jones Pinegar	95,000.00
5/28/19	Gammage Burnham	8,402.75
5/17/19	Kilpatrick Townsend	13,225.97
5/28/19	Piercy Bowler Taylor & Kern	50,000.00
5/24/19	Prince Yeates	12,000.00
5/17/19	Prince Yeates	20,000.00
Total Payments		<u>478,282.79</u>

SCHEDULE 6

NOAH CORPORATION

LIST OF ENTITIES WHICH THE DEBTOR HAS HAD AN INTEREST

Entity Name	Purpose	Existence
Duo Venues, LLC	Event Management	Currently Exists
Gabriel Management Corp.	Construction	Currently Exists
Noah Operations Fairview TX, LLC	Event Management	Currently Exists
Noah Operations Memphis TN, LLC	Event Management	Currently Exists
Noah Operations Kingston TN, LLC	Event Management	Currently Exists
Noah Operations San Antonio TX, LLC	Event Management	Currently Exists
Noah Operations Morrisville NC, LLC	Event Management	Currently Exists
Noah Operations Des Moines IA, LLC	Event Management	Currently Exists
Noah Operations Overland Park KS, LLC	Event Management	Currently Exists
Noah Operations Irving TX, LLC	Event Management	Currently Exists
Noah Operations Albuquerque NM, LLC	Event Management	Currently Exists
Noah Operations Chesapeake VA, LLC	Event Management	Currently Exists
Noah Operations Omaha NE, LLC	Event Management	Currently Exists
Noah Operations Westminster CO, LLC	Event Management	Currently Exists
Noah Operations Louisville KY, LLC	Event Management	Currently Exists
Noah Operations Auburn Hills MI, LLC	Event Management	Currently Exists
Noah Operations Bedford NH, LLC	Event Management	Currently Exists
Noah Operations Lincolnshire IL, LLC	Event Management	Currently Exists
Noah Operations Dickinson TX, LLC	Event Management	Currently Exists
Noah Operations Greenville SC, LLC	Event Management	Currently Exists
Noah Operations Fossil Creek TX, LLC	Event Management	Currently Exists
Noah Operations High Point NC, LLC	Event Management	Currently Exists
Noah Operations Cranberry PA, LLC	Event Management	Currently Exists
Noah Operations Katy TX, LLC	Event Management	Currently Exists
Noah Operations Plano TX, LLC	Event Management	Currently Exists
Noah Operations Lake Mary FL, LLC	Event Management	Currently Exists
Noah Operations Mentor OH, LLC	Event Management	Currently Exists
Noah Operations Naperville IL, LLC	Event Management	Currently Exists
Noah Operations Little Rock AR, LLC	Event Management	Currently Exists
Noah Operations Chandler AZ, LLC	Event Management	Currently Exists
Noah Operations Richardson TX, LLC	Event Management	Currently Exists
Noah Operations Sugar Land TX, LLC	Event Management	Currently Exists